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| Fill in this information to identify your case:                         |   |
|---|---|
| United States Bankruptcy Court for the:  Northern District of: Illinois |   |
| (State)  Case number (if known)   | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself   |                            |   |
|---|----------------------------|---|
|   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case):   |
| Your full name  | Caridad                    |   |
| Write the name that is on   | First name                 | First name  |
| your government-issued<br>picture identification (for<br>example, your driver's | Middle name                | Middle name   |
| license or passport   | Last name                  | Last name   |
| Bring your picture  |                            |   |
| identification to your meeting with the trustee.                                | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)  |
| 2. All other names you  | Caridad                    |   |
| have used in the last   | First name                 | First name  |
| 8 years   | Middle name                | Middle name   |
| Include your married or maiden names.   | Watkins                    | TAIL COLOR OF THE |
| maiden names.   | Last name                  | Last name   |
|   | Caridad<br>First name      | First name  |
|   | T il st riario             | Tistriano   |
|   | Middle name                | Middle name   |
|   |                            | Last name   |
|   | Last Harrie                | Last Harrie   |
| <ol><li>Only the last 4 digits<br/>of your Social</li></ol>                     | XXX - XX- 8861             | xxx - xx-   |
| Security number or<br>federal Individual  | OR                         | OR  |
| Taxpayer Identification number  | 9 xx - xx-                 | 9 xx - xx-  |
| (ITIN)  |                            |   |

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| Debtor 1 Caridad<br>First Name                               | Lopez Middle Name Last Name   | Case number (if known)   |
|--|---|--|
|  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. Any business names and Employer                           | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
| Identification<br>Numbers (EIN) you<br>have used in the last | Business name   | Business name  |
| 8 years Include trade names and                              | Business name   | Business name  |
| doing business as names                                      | EIN   | EIN  |
|  | EIN   | EIN  |
| 5. Where you live  | 2050 W 95th St. Apt. 25   | If Debtor 2 lives at a different address:  |
|  | 3950 W. 85th St., Apt. 2E<br>Number Street  | Number Street  |
|  | ChicagoIllinois60652CityStateZip Code   | City State Zip Code  |
|  | Cook<br>County  | County   |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|  | Number Street   | Number Street  |
|  | City State Zip Code   | City State Zip Code  |
| 6. Why you are choosing this district                        | Check one:  | Check one:   |
| to file for bankruptcy                                       | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |

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| De  | ebtor 1 Caridad   | NO. 1 11 NO.  | Lopez   |  | Case number (if kno  | wn)  |  |
|-----|---|---|---|--|--|--|--|
|     | First Name  | Middle Name   | Last Name   |  |  |  |  |
| Pa  | rt 2: Tell the Court Abo  | ut Your Bankruptcy (  | Case  |  |  |  |  |
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  |   | f description of each, see and 10)). Also, go to the top of   |  |  |  | ndividuals Filing for  |
| 8.  | How you will pay the fee  | more details about cashier's check, of may pay with a cree of the landividuals to Pay the landividuals to Pay in the official poverty you choose this of the cashier's cashier of the landividuals to Pay in the official poverty you choose this you choose | It how you may pay. Type<br>r money order If your a<br>edit card or check with a<br>fee in installments. If your Filing Fee in Instal<br>r fee be waived (You manot required to, waive your by line that applies to you | oically, if you attorney is a pre-printer you choose allments (O ay request our fee, an ur family si | ou are paying the<br>submitting your<br>ed address.<br>this option, sig<br>fficial Form 103<br>this option only<br>d may do so onl<br>ze and you are u | e fee yourself,<br>r payment on y<br>n and attach t<br>A).<br>if you are filir<br>y if your incor<br>unable to pay t | ce in your local court for you may pay with cash, your behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If filling Fee Waived (Official |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | No.  ✓ Yes. District  District  District  | trict of Minnesota  | When<br>When<br>When   | 5/2/2012<br>MM / DD / YYYY<br>MM / DD / YYYY   | Case number _ Case number _ Case number _  | 12-32669   |
| 10  | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No.  Yes. Debtor District Debtor District   |   | When<br>When   | MM / DD / YYYY   | Relationship to<br>Case number, i<br>Relationship to<br>Case number, i   | you  |
| 11. | Do you rent your residence?   | ✓ No. Got   | flord obtained an eviction to line 12.  out <i>Initial Statement About</i> bankruptcy petition.   |  |  |  |  |

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Debtor 1 Caridad Lopez \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Caridad Lopez
 Lopez
 Case number (if known)

 Last Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Caridad Lopez Case number (if known) Middle Name Last Name First Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Caridad Lopez Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 2/22/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Caridad                                 |                            | Lopez                   | Case number (if           | known)  |
|--|----------------------------|-------------------------|---------------------------|---|
| First Name                                       | Middle Name                | Last Name               |                           |   |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12,  | or 13 of title 11, Unite  | nave informed the debtor(s) about<br>d States Code, and have explained the<br>also certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. § 34  | 12(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the inf | formation in the sched    | lules filed with the petition is incorrect.   |
| attorney, you do not                             | · ·                        | , ,                     |                           | •   |
| need to file this page.                          | /s/ Kashwal Kaur           |                         | Date                      | 2/22/2017   |
|  | Signature of Attorney f    | or Debtor               |                           | IM / DD / YYYY  |
|  | g, .                       |                         |                           |   |
|  |                            |                         |                           |   |
|  | Kashwal Kaur               |                         |                           |   |
|  | Printed name               |                         |                           |   |
|  |                            |                         |                           |   |
|  | Semrad Law Firm            |                         |                           |   |
|  | Firm name                  |                         |                           |   |
|  | 11101 S. Western Ave       | nue                     |                           |   |
|  | Street                     |                         |                           |   |
|  |                            |                         |                           |   |
|  |                            |                         |                           |   |
|  | Chicago                    |                         | Illinois                  | 60643   |
|  | City                       |                         | State                     | Zip Code  |
|  |                            |                         |                           |   |
|  | Contact phone              |                         | Email address             | kkaur@semradlaw.com   |
|  |                            |                         |                           |   |
|  | <del></del>                |                         | <del></del>               |   |
|  | Bar number                 |                         | State                     |   |

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| Fill in this information to identify your case: |                           |             |                      |  |  |  |
|---|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1  | Caridad                   |             | Lopez                |  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |  |
| Debtor 2  |                           |             |                      |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |  |
|   |                           |             | (State)              |  |  |  |
| Case number<br>(If known)                       |                           |             |                      |  |  |  |

| Check if this is an |
|---------------------|
| amended filing      |

#### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | V   |
|--|---|
|  | Your assets Value of what you own                 |
| O to d to A/D D and A (O/Cald Face 400A/D)   |   |
| . Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00  |
| Ta. Copy line 35, Total feat estate, from <i>Confedure PVD</i>   | ¢12.606.06  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$13,606.26                                       |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$13,606.26                                       |
| art 2: Summarize Your Liabilities  |   |
|  |   |
|  | Your liabilities Amount you owe                   |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)   |   |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D   | \$8,393.00<br>——————————————————————————————————— |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00  |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | · · · · · · · · · · · · · · · · · · ·             |
| , ,  |   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$16,638.63                                       |
|  | \$16,638.63<br>\$25,031.63                        |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | <u>·                                     </u>     |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>   | <u>·                                     </u>     |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | <u>·                                     </u>     |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  Your total liabilities  art 3: Summarize Your Income and Expenses | \$25,031.63                                       |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>   | \$25,031.63                                       |

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Debtor 1 Caridad Lopez \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,371.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this             | inforr          | nation to identify your ca                         | ase:                               |               |   |             |  |  |  |
|--------------------------|-----------------|--|------------------------------------|---------------|---|-------------|--|--|--|
|                          |                 |  |                                    |               | Longs   |             |  |  |  |
| Debtor 1                 |                 | Caridad<br>First Name                              | Middle N                           | lame          | Lopez<br>Last Name  |             |  |  |  |
| Debtor 2                 | lima)           |  |                                    |               |   |             |  |  |  |
| (Spouse, if fi           | iing)           | First Name   | Middle N                           | lame          | Last Name   |             |  |  |  |
| United Sta               | ates B          | ankruptcy Court for the:                           | Northern                           |               | District of Illinois (State)  |             |  |  |  |
| Case num                 | ber             |  |                                    |               | (Otato)   |             |  |  |  |
| (If known)               |                 |  |                                    |               |   |             |  | Check if this is an  |  |
| Officia                  | al Fo           | orm 106A/B   |                                    |               |   |             |  | amended filing   |  |
| Sche                     | dul             | e A/B: Prope                                       | rty                                |               |   |             |  | 12/1   |  |
| category v<br>responsibl | where<br>le for | you think it fits best. B                          | se as complete a mation. If more s | nd ac<br>pace | asset only once. If an asset fits in n<br>curate as possible. If two married p<br>is needed, attach a separate sheet<br>question. | people are  | e filing together, both a                      | are equally  |  |
| Part 1:                  | Desc            | ribe Each Residenc                                 | e, Building, Laı                   | nd, o         | r Other Real Estate You Own o   | r Have a    | an Interest In                                 |  |  |
|                          |                 |  | uitable interest i                 | in any        | residence, building, land, or simila  | ar propert  | y?   |  |  |
| ~                        |                 | Go to Part 2                                       |                                    |               |   |             |  |  |  |
|                          | Yes.            | Where is the property?                             |                                    |               |   |             |  |  |  |
| 1.1                      |                 |  |                                    |               | at is the property? Check all that apple  | ly.         |  | claims or exemptions. Put<br>ired claims on <i>Schedule D:</i> |  |
| 1.1                      | Stree           | Street address, if available, or other description |                                    |               | Single-family home<br>Duplex or multi-unit building   |             | Creditors Who Have Claims Secured by Property. |  |  |
|                          |                 |  |                                    |               | Condominium or cooperative  |             | Current value of the entire property?          | Current value of the   |  |
|                          |                 |  |                                    | Ħ             | Manufactured or mobile home   |             | ————   | portion you own?   |  |
|                          | Num             | ber Street   |                                    |               | Land  |             | Describe the nature of                         | f vour ownership   |  |
|                          |                 |  |                                    | ш             | Investment property<br>Timeshare  |             | interest (such as fee s                        | simple, tenancy by   |  |
|                          | City            | State  | Zip Code                           |               | Other   |             | the entireties, or a life                      | e estate), if known.   |  |
|                          |                 |  |                                    | Who           | o has an interest in the property? C  | heck        | Check if this is co<br>(see instructions)      | ommunity property  |  |
|                          |                 |  |                                    |               | Debtor 1 only   |             | Ш  |  |  |
|                          |                 |  |                                    | П             | Debtor 2 only   |             |  |  |  |
|                          |                 |  |                                    | ш             | Debtor 1 and Debtor 2 only  |             |  |  |  |
|                          |                 |  |                                    |               | At least one of the debtors and anothe  | er          |  |  |  |
|                          |                 |  |                                    |               | er information you wish to add abou<br>perty identification number:   | ut this ite | m, such as local                               |  |  |
| If you                   | own o           | or have more than one, lis                         | st here:                           |               | <u> </u>  |             |  |  |  |
|                          |                 |  |                                    |               | at is the property? Check all that appl   | ly.         |  | claims or exemptions. Put ired claims on <i>Schedule D:</i>    |  |
| 1.2                      | Stree           | t address, if available, or o                      | other description                  | =             | Single-family home  |             |  | nims Secured by Property.                                      |  |
|                          |                 |  |                                    |               | Duplex or multi-unit building Condominium or cooperative  |             | Current value of the                           | Current value of the   |  |
|                          |                 |  | _                                  |               | Manufactured or mobile home   |             | entire property?                               | portion you own?   |  |
|                          | Nicon           | hov Ctroot   |                                    | Ħ             | Land  |             |  |  |  |
|                          | Num             | ber Street   |                                    |               | Investment property   |             | Describe the nature of interest (such as fee s | simple, tenancy by   |  |
|                          | City            | State  | Zip Code                           |               | Timeshare<br>Other  |             | the entireties, or a life                      | e estate), if known.   |  |
|                          |                 |  |                                    |               | o has an interest in the property? C  | heck        | Check if this is co                            | ommunity property  |  |
|                          |                 |  |                                    | one           | Debtor 1 only   |             |  |  |  |
|                          |                 |  |                                    | =             | Debtor 2 only   |             |  |  |  |
|                          |                 |  |                                    |               | Debtor 1 and Debtor 2 only  |             |  |  |  |
|                          |                 |  |                                    |               | At least one of the debtors and anothe  | er          |  |  |  |
|                          |                 |  |                                    |               | er information you wish to add abou<br>perty identification number:   | ut this ite | m, such as local                               |  |  |

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| Debtor 1  | Caridad<br>First Name  | Middle Name                               | Lopez<br>Last Name   | Case number      | (if known)  |   |
|-----------|--|---|--|------------------|---|---|
| 1.3       | et address, if available, or ot                              | \<br>[                                    | Mhat is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home                           | apply.           | the amount of any secu  | claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own? |
| Nun       | nber Street State  | Zip Code                                  | Land Investment property Timeshare Other   | _                | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by   |
|           |  | ]<br>[<br>]<br>[                          | Who has an interest in the property  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and and other information you wish to add a | other            | (see instructions)  | mmunity property  |
|           | the dollar value of the po<br>ve attached for Part 1. Wi     | rtion you own for a<br>rite that number h |  | uding any entrie | s for pages   |   |
| Do you ow |  | equitable interest                        | t in any vehicles, whether they are  |                  |   |   |
|           | ns, trucks, tractors, sport ut                               |   | also report it on Schedule G: Executor<br>cycles   | ry Contracts and | Unexpired Leases.   |   |
| 3.1       | Make<br>Model:<br>Year:                                      | Hyundai<br>Accent<br>2013                 | Who has an interest in the propone.  Debtor 1 only   | perty? Check     | the amount of any secu  | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.                         |
|           | Approximate mileage:  Other information: 2013 Hyundai Accent | 14000                                     | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community   |                  | Current value of the entire property?<br>\$11425.00                     | Current value of the portion you own?<br>\$11425.00   |
| 3.2       | Make<br>Model:<br>Year:                                      |   | <ul><li>instructions)</li><li>Who has an interest in the propone.</li><li>Debtor 1 only</li></ul>  | perty? Check     | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.                                      |
|           | Approximate mileage: Other information:                      |   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)   |                  | Current value of the entire property?                                   | Current value of the portion you own?   |

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| Sample   S   | ebtor 1 | Caridad              |             | Lopez                      | Case number        | er (if known)           |                                  |  |
|--|---------|----------------------|-------------|----------------------------|--------------------|-------------------------|----------------------------------|--|
| Model: Year: Approximate mileage: Other information: Other information:    Debtor 1 and Debtor 2 only   Current value of the entire property?   Current value of the entire property?  |         | First Name           | Middle Name | Last Name                  |                    |                         |                                  |  |
| Other information:    Debtor 1 and Debtor 2 only   Current value of the portion you own?    At least one of the debtors and another   Check if this is community property? Check one.   Current value of the amount of any secured claims on Schedule Check if this is community property? Check one.   Current value of the portion you own?    Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories    Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories   Ves  | 3.3     | Model:               |             | one.                       | property? Check    | the amount of any secu  | ired claims on <i>Schedule D</i> |  |
| Other information:  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Other information: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Approximate mileage: Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)  |         | Approximate mileage: |             | Debtor 2 only              |                    | Current value of the    | Current value of the             |  |
| At least one of the debtors and another   Check if this is community property (see instructions)   |         | Other information:   |             |                            | nly                |                         |                                  |  |
| ## Who has an interest in the property? Check one.    Approximate mileage:   |         |                      |             | At least one of the debtor | rs and another     |                         |                                  |  |
| Model: Year: Approximate mileage: Debtor 1 only Debtor 2 only The information: Debtor 2 only At least one of the debtors and another instructions)  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  No Yes  4.1 Make Model: Year: Approximate mileage: Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only The information: Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only The information: Debtor 1 only Debtor 1 and Debtor 2 only Debtor 3 and interest in the property? Check one. No Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 and another Circultive Who Have Claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property.  Approximate mileage: Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Other information: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Current value of the entire property? Circent value of the entire property? Approximate mileage: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Approximate mileage: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Approximate mileage: Debtor 2 anly Approximate mileage: Debt |         |                      |             | -                          | nity property (see |                         |                                  |  |
| Year:  | 3.4     | Make                 |             | Who has an interest in the | property? Check    | Do not deduct secured   | claims or exemptions. Pu         |  |
| Approximate mileage:   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 and Debtor 2 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   At least one of the debtors and another   Check if this is community property (see instructions)   No   Yes   No   Yes   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Current value of the entire property?   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Current value of the entire property?   Check one.   Check if this is community property (see instructions)   Debtor 1 only   Debtor 1 only   Current value of the entire property?   Debtor 1 only   Current value of the entire property?   Debtor 1 only   Current value of the entire property?   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 4 onle   Debtor 4 onle   Debtor 5 only   Debtor 5 only   Debtor 6 onle   Debtor 6 onle   Debtor 8 onle   Debtor 9 only   Debtor 9 only   Debtor 9 only   Debtor 9 only   Debtor 1 only   Deb |         |                      |             |                            |                    |                         |                                  |  |
| Other information:    Debtor 1 and Debtor 2 only   Current value of the entire property?   Current value of the portion you own?   |         |                      |             | Debtor 1 only              | Creditors Who I    | Creditors vvno Have Cia | lave Claims Secured by Property. |  |
| At least one of the debtors and another    Check if this is community property (see instructions)    Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories    Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    V No  |         | Approximate mileage. |             | Debtor 2 only              |                    |                         |                                  |  |
| Check if this is community property (see instructions)    Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories   Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories   No   |         | Other information:   |             | Debtor 1 and Debtor 2 or   | าly                | entire property?        | portion you own?                 |  |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    No   |         |                      |             | At least one of the debtor | s and another      |                         |                                  |  |
| Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    No   |         |                      |             | -                          | nity property (see |                         |                                  |  |
| Year: Approximate mileage: Debtor 1 only Debtor 2 only Debtor 2 only  Current value of the entire property?  At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Year: Approximate mileage: Debtor 1 only Debtor 1 only Debtor 2 only  Current value of the entire property? Do not deduct secured claims or exemptions. For the amount of any secured claims on Schedules Creditors Who Have Claims Secured by Propert Creditors Who Have Claims Secured by Propert Creditors Who Have Claims Secured by Propert Creditors Who Have Claims Or Schedules Creditors Who | 4.1     | Make                 |             |                            | property? Check    |                         |                                  |  |
| Approximate mileage:  Other information:  Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Year: Approximate mileage: Other information:  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only  Current value of the entire property?  Do not deduct secured claims or exemptions. For the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Standard  Current value of the entire property?  Current value of the entire property?  Standard  Current value of the entire property?  Standard  Current value of the entire property?  |         |                      |             |                            |                    |                         |                                  |  |
| Other information:  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Year: Approximate mileage: Do not deduct secured claims or exemptions. Find the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property.  Debtor 1 only Debtor 2 only Debtor 2 only Current value of the entire property?  Current value of the entire property?  Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$11425.00  |         |                      |             |                            |                    | Current value of the    | Current value of the             |  |
| 4.2 Make   |         | Other information:   |             |                            | nly                |                         |                                  |  |
| 4.2 Make Model: Year: Approximate mileage: Other information:  Make Other information:  Model: Year: Approximate mileage:  Other information:  Model: Year: Approximate mileage:  Other information:  Model: Year: Approximate mileage:  Debtor 1 only Debtor 2 only Debtor 2 only  At least one of the debtors and another Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$\frac{1}{2}  Do not deduct secured claims or exemptions. Find the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property Current value of the entire property?  Current value of the entire property?  State 1425 00   |         |                      |             | At least one of the debtor | s and another      |                         |                                  |  |
| Model: Year: Approximate mileage: Other information:  Debtor 1 only Debtor 2 only Other information:  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property Current value of the entire property?  Current value of the portion you own?  Current value of the portion you own?  S11425 00   |         |                      |             | - 1 1                      | nity property (see |                         |                                  |  |
| Year: Approximate mileage: Debtor 2 only Other information: Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  Current value of the entire property? Current value of the portion you own?  Current value of the portion you own?  Current value of the portion you own?  Satisfactory  Current value of the portion you own?   | 4.2     | Make                 |             | Who has an interest in the | property? Check    | Do not deduct secured   | claims or exemptions. Pr         |  |
| Approximate mileage:  Other information:  Debtor 2 only  Other information:  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$11425.00   |         |                      |             |                            |                    |                         |                                  |  |
| Other information:  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$\frac{\text{Current value of the portion you own?}}{\text{Current value of the portion you own?}}\$  |         |                      | -           | <b>=</b> '                 |                    | Greditors vvno mave Cla | шть зеситей ву Ргорепу           |  |
| At least one of the debtors and another  Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  |         | Approximate mileage. |             |                            |                    |                         |                                  |  |
| Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$\frac{11425}{2} 00   |         | Other information:   |             | _ <b>L</b>                 | •                  | entire property?        | portion you own?                 |  |
| instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$\frac{11425}{00}\$  |         |                      |             | At least one of the debtor | s and another      |                         |                                  |  |
|  |         |                      |             | -                          | nity property (see |                         |                                  |  |
| ou have attached for Part 2. Write that number here  |         |                      |             |                            |                    |                         | 1425 00                          |  |

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$125.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Used Clothing \$225.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$750.00 for Part 3. Write that number here .....

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: TCF 17.1. Checking account: \$1325.26 \$106.00 17.2. Checking account: Capital One 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Caridad                                      |   | Lopez                      | Case number (if known)                      |  |
|------|--|---|----------------------------|---|--|
|      | First Name   | Middle Name   | Last Name                  |   |  |
| 20.  | Negotiable instruments                             | orate bonds and other negotials include personal checks, cashiers ents are those you cannot transfer assuer name: | checks, promissory no      | tes, and money orders.                      |  |
| 0.4  | B. 11  |   |                            |   |  |
| 21.  | Retirement or pension<br>Examples: Interests in If |   | . thrift savings accounts  | s, or other pension or profit-sharing plans |  |
|      | ✓ No   | ,,  | ,                          | ,,  |  |
|      | Yes. List each                                     | Type of account:  | Institution name:          |   |  |
|      | account  | 401(k) or similar plan:   |                            |   |  |
|      | separately.  |   |                            |   |  |
|      |  | Pension plan:   |                            |   |  |
|      |  | IRA:  |                            |   |  |
|      |  | Retirement account:   |                            |   |  |
|      |  | Keogh:  |                            |   |  |
|      |  | Additional account:   |                            |   |  |
|      |  | Additional account:   |                            |   |  |
| 22.  |  | prepayments d deposits you have made so that with landlords, prepaid rent, public Electric:                       |                            |   |  |
|      |  |   | _                          |   |  |
|      |  | Gas:  | _                          |   |  |
|      |  | Heating oil:  |                            |   |  |
|      |  | Security deposit on rental unit:  |                            |   |  |
|      |  | Prepaid rent:   |                            |   |  |
|      |  | Telephone:  |                            |   |  |
|      |  | Water:  | _                          |   |  |
|      |  | Rented furniture:   |                            |   |  |
|      |  | Other:  |                            |   |  |
| 23.  | Annuities (A contract fo                           | or a periodic payment of money to   | you, either for life or fo | r a number of years)                        |  |
|      | ✓ No ☐ Yes   | Issuer name and description:  |                            |   |  |
|      |  |   |                            |   |  |
|      |  |   |                            |   |  |
|      |  |   |                            |   |  |

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| שטטט  | or 1 Caridad   |   | Lopez   | Case number (if known)   |  |
|-------|--|---|---|--|--|
| 24.   | First Name Interests in an   | Middle Peducation IRA, in an acc                                |   | or under a qualified state tuition program.  |  |
|       | 26 U.S.C. §§ 53  | 0(b)(1), 529A(b), and 529(                                      | (b)(1).   |  |  |
|       | ✓ No<br>☐ Yes  | stitution name and descrip                                      | otion. Separately file the records of any                                     | interests.11 U.S.C. § 521(c):  |  |
|       | _  |   |   |  |  |
|       | _  |   |   |  |  |
| 25.   | Trusts, equitab<br>exercisable for   | •   | property (other than anything listed  | in line 1), and rights or powers   |  |
|       | ✓ No   |   |   |  | ı  |
|       | Yes. Describ   | e   |   |  |  |
| 26.   |  |   | secrets, and other intellectual propes, proceeds from royalties and licensing |  |  |
|       | No   | ,   |   | g  |  |
|       | Yes. Describ   | e   |   |  |  |
| 27.   | Licenses franc   | hises, and other general  | intangibles   |  |  |
|       |  |   | ses, cooperative association holdings,  | liquor licenses, professional licenses   |  |
|       | ✓ No  Yes. Describ   | 00  |   |  | l  |
|       | Tes. Describ   | 6   |   |  |  |
| Maria |  |   |   |  | O  |
| Mon   | ney or property  | owed to you?  |   |  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 28.   | Tax refunds owe  | d to you  |   |  |  |
|       |  |   |   |  |  |
|       | <b>✓</b> No  |   |   | Fadami   | Φ0.00  |
|       | Yes. Give spo<br>about t   | ecific information<br>hem, including whether                    |   | Federal:   | \$0.00   |
|       | Yes. Give speabout to you alre   |   |   | State:   | \$0.00   |
| 29.   | Yes. Give spr<br>about t<br>you alro<br>and the  | hem, including whether eady filed the returns                   |   |  |  |
| 29.   | Yes. Give sprabout t you alreand the   | hem, including whether<br>eady filed the returns<br>e tax years | spousal support, child support, mainte  | State:   | \$0.00<br>\$0.00   |
| 29.   | Yes. Give sprabout tyou alread and the Family support Examples: Past d   | hem, including whether eady filed the returns at tax years      | spousal support, child support, mainte  | State:<br>Local:   | \$0.00<br>\$0.00   |
| 29.   | Yes. Give sprabout tyou alread and the Family support Examples: Past d   | hem, including whether<br>eady filed the returns<br>e tax years | spousal support, child support, mainte  | State:  Local: enance, divorce settlement, property settlemen  | \$0.00<br>\$0.00   |
| 29.   | Yes. Give sprabout tyou alread and the Family support Examples: Past d   | hem, including whether eady filed the returns at tax years      | spousal support, child support, mainte  | State:  Local: enance, divorce settlement, property settlement Alimony:  | \$0.00<br>\$0.00<br>at<br>\$0.00   |
| 29.   | Yes. Give sprabout tyou alread and the Family support Examples: Past d   | hem, including whether eady filed the returns at tax years      | spousal support, child support, mainte  | State:  Local: enance, divorce settlement, property settlementh Alimony:  Maintenance:   | \$0.00<br>\$0.00<br>at<br>\$0.00<br>\$0.00   |
| 29.   | Yes. Give sprabout tyou alread and the Family support Examples: Past d   | hem, including whether eady filed the returns at tax years      | spousal support, child support, mainte  | State: Local:  Inance, divorce settlement, property settlement Alimony: Maintenance: Support:  | \$0.00<br>\$0.00<br>at<br>\$0.00<br>\$0.00<br>\$0.00                               |
| 30.   | Yes. Give spinabout the you alread and the series a | hem, including whether eady filed the returns a tax years       |   | State: Local:  Inance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00<br>\$0.00<br>st<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00                     |
| 30.   | Yes. Give spinabout the you alread and the series a | hem, including whether eady filed the returns a tax years       |   | State: Local:  Inance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:                      | \$0.00<br>\$0.00<br>st<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00                     |
| 30.   | Yes. Give spinabout the you alread and the series a | hem, including whether eady filed the returns a tax years       | ce payments, disability benefits, sick pa                                     | State: Local:  Inance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00<br>\$0.00<br>st<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00                     |
| 30.   | Yes. Give spinabout the your alread and the series are series and the series are series and the series are series and the series and the series are series  | hem, including whether eady filed the returns a tax years       | ce payments, disability benefits, sick pa                                     | State: Local:  Inance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00<br>\$0.00<br>st<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00                     |

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| Deb  | tor 1 Caridad   |                            | Lopez   | Case number (if known)                         |  |
|------|---|----------------------------|---|--|--|
|      | First Name  | Middle Name                | Last Name   |  |  |
| 31.  | Interests in insurance pol<br>Examples: Health, disability,   |                            | n savings account (HSA); credit, h                              | nomeowner's, or renter's insurance             |  |
|      | Yes. Name the insurance of each policy and list in  | ce company                 | Company name:   | Beneficiary:                                   | Surrender or refund value:   |
| 32.  | Any interest in property t If you are the beneficiary of property because someone  No Yes. Describe | a living trust, expect pro |   | y, or are currently entitled to receive        |  |
| 33.  | Claims against third parti  |                            | u have filed a lawsuit or made<br>ance claims, or rights to sue | a demand for payment                           |  |
| 34.  | Other contingent and unl to set off claims  No Yes. Describe  | iquidated claims of e      | very nature, including counterd                                 | claims of the debtor and rights                |  |
| 35.  | Any financial assets you o  | did not already list       |   |  |  |
| 36.  |   | -                          | Part 4, including any entries fo                                |  | \$1431.26  |
| Part |   |                            | -   | nterest In. List any real estate in Par        | t1.  |
| 37.  | No. Go to Part 6.  Yes. Go to line 38.  | egal or equitable inte     | rest in any business-related pr                                 |  | Current value of the cortion you own? On not deduct secured claims or exemptions |
| 38.  | Accounts receivable or c  | ommissions you alrea       | dy earned   |  | o o o inpuorio   |
|      | Yes. Describe   |                            |   |  |  |
| 39.  | <u> </u>  |                            | modems, printers, copiers, fax ma                               | achines, rugs, telephones, desks, chairs, elec | tronic devices   |
|      | Yes. Describe   |                            |   |  |  |
|      |   | <del></del>                |   |  |  |

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| Debt | tor 1 Caridad   | Lopez                                    | Case number (if known)         |  |
|------|---|--|--------------------------------|--|
|      | First Name Middle Name  | e Last Name                              | <del></del>                    |  |
| 40.  | Machinery, fixtures, equipment, supplies yo                                   | u use in business, and tools of your     | trade                          |  |
|      | <b>✓</b> No   |  |                                |  |
|      | <u> </u>  |  |                                |  |
|      | Yes. Describe   |  |                                |  |
|      |   |  |                                |  |
|      |   |  |                                |  |
| 41.  | Inventory   |  |                                |  |
|      | .✓ No   |  |                                |  |
|      |   |  |                                |  |
|      | Yes. Describe   |  |                                |  |
|      |   |  |                                |  |
| 40   | Interests in portnershing or joint ventures                                   |  |                                |  |
| 42.  | Interests in partnerships or joint ventures                                   |  |                                |  |
|      | ✓ No  |  |                                |  |
|      | Yes. Give specific  | Name of entity:                          | % of ownership:                |  |
|      | information about   |  |                                |  |
|      | them  |  |                                | <del>-</del>                                   |
|      |   |  |                                | <u> </u>                                       |
|      |   |  |                                |  |
|      |   |  | <del></del>                    |  |
| 43.  | Customer lists, mailing lists, or other compila                               | ations                                   |                                |  |
|      | <b>✓</b> No   |  |                                |  |
|      | Yes. Do your lists include personally identifi                                | able information (as defined in 11 U.S   | S.C. 8 101(41A))?              |  |
|      | □ ·····   | (  | 3                              |  |
|      | ☐ No  |  |                                |  |
|      | Yes. Describe   |  |                                |  |
|      |   |  |                                |  |
| 44   | Any business-related property you did not a                                   | Iready list                              |                                |  |
|      |   |  |                                |  |
|      | ✓ No  |  |                                |  |
|      | Yes. Give specific  |  |                                |  |
|      | information   |  |                                | <u> </u>                                       |
|      |   |  |                                |  |
|      |   |  |                                | <del></del>                                    |
|      |   |  |                                |  |
|      |   |  |                                |  |
|      |   |  |                                | <del></del>                                    |
|      |   |  |                                |  |
|      |   |  |                                |  |
| 45 4 | dalaha dallam mahua af all af manu anamina fusus                              | Dant C. in alcoding a new authors for us |                                |  |
|      | dd the dollar value of all of your entries from art 5. Write that number here |  |                                |  |
| •    | art of write that humber here   |  |                                |  |
| Part | 6: Describe Any Farm- and Commerc   | ial Fishing-Related Property Y           | ou Own or Have an Interest In. |  |
| rait | If you own or have an interest in farmland, list it                           |  |                                |  |
| 40   |   |  |                                |  |
| 46.  | Do you own or have any legal or equitable in                                  | nterest in any farm- or commercial       | iisiiiig-reiated property?     |  |
|      | No. Go to Part 7.   |  |                                | Current value of the                           |
|      | Yes. Go to line 47.   |  |                                | portion you own?  Do not deduct secured claims |
|      |   |  |                                | or exemptions                                  |
| 47   | Farm animals  |  |                                |  |
| 77.  | Examples: Livestock, poultry, farm-raised fish                                |  |                                |  |
|      |   |  |                                |  |
|      | <b>✓</b> No   |  |                                |  |
|      | Yes. Describe   |  |                                |  |
|      |   |  |                                |  |
|      |   |  |                                |  |

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| Debt         | tor 1 Caridad First Name       |  | opez (                 | Case number (if known)       |                  |
|--------------|--------------------------------|--|------------------------|------------------------------|------------------|
| 48.          | Crops-either growing           |  |                        |                              |                  |
|              | No Yes. Describe               |  |                        |                              |                  |
| 49.          | Farm and fishing equip         | oment, implements, machinery, fixture    | s, and tools of trade  |                              |                  |
|              | <b>✓</b> No                    |  |                        |                              |                  |
|              | Yes. Describe                  |  |                        |                              |                  |
| 50.          | Farm and fishing suppl         | lies, chemicals, and feed                |                        |                              |                  |
|              | <b>✓</b> No                    |  |                        |                              |                  |
|              | Yes. Describe                  |  |                        |                              |                  |
|              | L                              |  |                        |                              |                  |
| 51.          | Any farm- and comme            | rcial fishing-related property you did n | ot already list        |                              |                  |
|              | No No                          |  |                        |                              |                  |
|              | Yes. Describe                  |  |                        |                              |                  |
|              |                                |  |                        |                              |                  |
|              |                                | l of your entries from Part 6, including |                        | ı have attached              |                  |
| •            | art o. write that humber       | nere                                     |                        |                              |                  |
|              |                                |  |                        |                              |                  |
| Part 1       | Z. Describe All Pro            | perty You Own or Have an Intere          | et in That You Did Not | List Ahova                   |                  |
|              |                                | perty of any kind you did not already li |                        | LISTABOTO                    |                  |
|              |                                | s, country club membership               |                        |                              |                  |
|              | ✓ No                           |  |                        |                              |                  |
|              | Yes. Give specific information |  |                        |                              |                  |
|              |                                |  |                        |                              |                  |
|              |                                |  |                        |                              |                  |
| 54. A        | dd the dollar value of al      | I of your entries from Part 7. Write tha | t number here          |                              | <b>&gt;</b>      |
|              |                                |  |                        |                              |                  |
|              |                                |  |                        |                              |                  |
|              |                                |  |                        |                              |                  |
| Part         | 8: List the Totals of          | Each Part of this Form                   |                        |                              |                  |
| 55. <b>F</b> | Part 1: Total real estate      | , line 2                                 |                        | <b>&gt;</b>                  |                  |
| 56. <b>p</b> | oart 2 total vehicles, lin     | e 5                                      | \$11425.00             |                              |                  |
| 57. <b>P</b> | art 3: Total personal an       | d household items, line 15               | \$750.00               |                              |                  |
| 58. <b>P</b> | art 4: Total financial as      | sets, line 36                            | \$1431.26              |                              |                  |
| 59. <b>F</b> | Part 5: Total business-re      | elated property, line 45                 | ψ1431.20               |                              |                  |
| 60. <b>F</b> | Part 6: Total farm- and f      | ishing-related property, line 52         |                        |                              |                  |
|              | Part 7: Total other prop       |  |                        |                              |                  |
|              |                                | Add lines 56 through 61                  | ф40000 00              |                              | <b>M40000</b> CC |
|              | ,                              | <b></b>                                  | \$13606.26             | Copy personal property total | + \$13606.26     |
|              |                                |  |                        |                              | \$13606.26       |
| 63. <b>T</b> | otal of all property on S      | chedule A/B. Add line 55 + line 62       |                        |                              |                  |

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| Debtor 1                        | Caridad                      |             | Lopez                |   |
|---------------------------------|------------------------------|-------------|----------------------|---|
|                                 | First Name                   | Middle Name | Last Name            |   |
| Debtor 2<br>(Spouse, if filing) | First Name                   | Middle Name | Last Name            | _ |
| United States                   | Bankruptcy Court for the: No | orthern     | District of Illinois | _ |
| Case number<br>(If known)       |                              |             | (State)              | _ |
|                                 | Form 106C                    |             |                      |   |

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | t 1: Identify the Property You Claim          | n as Exempt                         |   |                                    |
|-----|---|-------------------------------------|---|------------------------------------|
| 1.  | Which set of exemptions are you claiming      | ng? Check one only, ev              | ren if your spouse is filing with you.  |                                    |
|     | You are claiming state and federal r          | onbankruptcy exemp                  | otions. 11 U.S.C. § 522(b)(3)   |                                    |
|     | You are claiming federal exemptions           | s. 11 U.S.C. § 522(b)(              | 2)  |                                    |
| 2.  | For any property you list on Schedule A       | B that you claim as e               | xempt, fill in the information below.   |                                    |
|     | Brief description of the property and         | Current value of                    | Amount of the exemption you claim   | Specific laws that allow exemption |
|     | line on Schedule A/B that lists this property | the portion you<br>own              | Check only one box for each exemption.  |                                    |
|     |   | Copy the value from<br>Schedule A/B |   |                                    |
|     | Brief   |                                     |   | 735 ILCS 5/12-1001(b)              |
|     | description:                                  | \$350.00                            | \$350.00  |                                    |
|     | Misc. Household Goods                         |                                     | 100% of fair market value, up to any  | _                                  |
|     | Line from Schedule A/B: 06                    |                                     | applicable statutory limit  |                                    |
|     | Brief   |                                     |   | 735 ILCS 5/12-1001(a)              |
|     | description:                                  | \$225.00                            | \$225.00  |                                    |
|     | Misc. Used Clothing                           |                                     | 100% of fair market value, up to any  | _                                  |
|     | Line from Schedule A/B:11                     |                                     | applicable statutory limit  |                                    |
| 3.  | ✓ No  | ry 3 years after that for           | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? |                                    |

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$125.00 description: **✓** \$125.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$50.00 description: **✓** \$50.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$1,325.26 description: **✓** \$1,325.26 Checking account, TCF 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17 735 ILCS 5/12-1001(c); 735 ILCS Brief \$11,425.00 description: 5/12-1001(b) \$2,400.00; \$632.00 Hyundai Accent, 2013, 100% of fair market value, up to any 2013 Hyundai Accent applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$106.00

\$106.00

100% of fair market value, up to any

applicable statutory limit

description:

Line from Schedule A/B:

Checking account,

17

Capital One

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|                                     |  | D  | ocument Page 22 of   | 12  |   |                                       |
|-------------------------------------|--|--|--|---|---|---------------------------------------|
| Fill in this infor                  | mation to identify your ca   | se:  |  |   |   |                                       |
| Debtor 1                            | Caridad  |  | Lopez  |   |   |                                       |
|                                     | First Name   | Middle Name  | Last Name  |   |   |                                       |
| Debtor 2<br>(Spouse, if filing)     | First Name   | Middle Name  | Last Name  |   |   |                                       |
| United States E                     | Bankruptcy Court for the:  | Northern   | District of Illinois   |   |   |                                       |
| Case number                         |  |  | (State)  |   |   |                                       |
| Official                            | Form 106D  |  |  |   |   | Check if this is an<br>amended filing |
| Schedu                              | le D: Credite  | ors Who Ha   | ve Claims Secure   | ed by Prop  | ertv  | 12/15                                 |
| 1. Do any o                         | e number (if known).<br>creditors have claims se   | ecured by your proper  | rty? with your other schedules. You hav  | ·   |   | es, write your                        |
| 2. List all separate                | secured claims. If a creditely for each claim. If more the   | nan one creditor has a pa  | cured claim, list the creditor<br>rticular claim, list the other creditors<br>order according to the creditor's                  | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any     |
| 2.1 WFDS                            |  | Describe the property  | y that secures the claim:  | \$8,393.00  | \$11,425.00   | \$0.00                                |
| IRVINE City Who ow Det Det At leand | CA 92623 State ZIP Code res the debt? Check one. btor 1 only btor 2 only btor 1 and Debtor 2 only east one of the debtors a another eck if this claim relates a community debt | 2013 Hyundai Accent As of the date you file Contingent Unliquidated Disputed Nature of lien. Check ✓ An agreement you car loan) Statutory lien (such Judgment lien from Other (including a research) | all that apply.  all that apply.  made (such as mortgage or secured as tax lien, mechanic's lien)  n a lawsuit  right to offset) |   |   |                                       |
| incurre                             |  | Last 4 digits of accou   | int number 8070  |   |   |                                       |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$8,393.00

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| Debtor 1 Cardad Lopez First Name Middle Name Last Name  Debtor 2 (Spouse, if filling) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois (State)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in Schedule B: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one ereditor holds an particular claim, list the creditor in Page 13.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |  |  |   |  |  |   |  |  |   |
|--|--|--|---|--|--|---|--|--|---|
| First Name Middle Name Last Name  Debtor 2  Spouse, if filing)  First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois (State)  Case number (If known)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Winh Hold Claims Secured by Property in more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (If known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, as much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditors hold claim, list the creditor is Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | Fill                                   | in this infor  | mation to identify your c   | ase:   |  |   |  |  |   |
| Debtor 2 (Spouse, Iffiling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northem District of Illinois (State)  Case number (If Krown)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 478: Property (Official Form 106A) and on Schedule 67: Executory Contracts and Unexpired Leases (Official Form 106A). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the creditor in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | Deb                                    | otor 1   | Caridad   |  | Lopez  |   |  |  |   |
| United States Bankruptcy Court for the:   Northern   District of   Illinois   (State)  |  |  | First Name  | Middle Name  | Last Name  |   |  |  |   |
| United States Bankruptcy Court for the: Northern District of Illinois  Case number  (fixnown)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the reparty to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 8. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims and part 2 for creditor space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor sparately for each claim. For each claim listed, dientify what type of claim it is. If a claim has both priority and onepriority amounts, list the creditor separately for each claim. For each clai |  |  | =   |  |  |   |  |  |   |
| Case number ((State))  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | (Spc                                   | ruse, II IIIIng)   | First Name  | Middle Name  | Last Name  |   |  |  |   |
| Case number ((Itknown))  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | Uni                                    | ted States E   | Bankruptcy Court for the:   | Northern   | District of Illinois   |   |  |  |   |
| Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   |  |  |   |  | (State)  |   |  |  |   |
| Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |  |  |   |  |  |   |  |  |   |
| Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | Of                                     | ficial F   | orm 106F/F  |  |  |   | Ch   | eck if this is a                                 | n amended filing                                  |
| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |  |  |   |  |  |   | _  |  |   |
| other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on <i>Schedule A/B: Property</i> (Official Form 106A/B) and on <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G). Do not include any creditors with partially secured claims that are listed in <i>Schedule D: Creditors Who Hold Claims Secured by Property</i> . If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | Sc                                     | chedu  | ule E/F: Cre  | editors Who  | Have Unse  | cured Claims  |  |  | 12/15   |
| Yes.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  | othe<br>Forn<br>clair<br>the c<br>know | r party to a<br>n 106A/B) a<br>ns that are<br>entries in t<br>wn). | any executory contract<br>and on <i>Schedule G: Exe</i><br>a listed in <i>Schedule D: C</i><br>he boxes on the left. At | s or unexpired leases that<br>cutory Contracts and Une<br>creditors Who Hold Claims<br>tach the Continuation Pag | could result in a claim.<br>xpired Leases (Official<br>Secured by Property. It           | Also list executory contract<br>Form 106G). Do not include a<br>more space is needed, copy  | s on <i>Sched</i><br>any credito<br>the Part y | lule A/B: Pro<br>rs with partia<br>ou need, fill | perty (Official<br>ally secured<br>it out, number |
| Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   | 1.                                     | Do any ci  | reditors have priority ur   | secured claims against ye  | ou?  |   |  |  |   |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)   |  | <b>√</b> No. (   | Go to Part 2.   |  |  |   |  |  |   |
| listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  |  | Yes.   |   |  |  |   |  |  |   |
|  | 2.                                     | listed, ider<br>As much a<br>Continuat                             | ntify what type of claim it<br>as possible, list the claims<br>ion Page of Part 1. If mor                               | is. If a claim has both priority<br>is in alphabetical order accord<br>to than one creditor holds a p            | y and nonpriority amount<br>ling to the creditor's nam<br>particular claim, list the otl | s, list that claim here and show<br>e. If you have more than two poner creditors in Part 3. | both priorit                                   | y and nonprio                                    | ority amounts.                                    |
|  |  | (For an ex   | spianation of each type of  | ciaim, see the instructions for  | or this form in the instruc  | tion booklet.)  | Total  | Priority   | Nonpriority                                       |

claim

amount

amount

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| Debto    | r 1 Caridad  | Lopez          | Case number (if known)  |                   |
|----------|--|----------------|---|-------------------|
|          | First Name Middle Name   | Last Name      |   |                   |
| Part 2   | List All of Your NONPRIORITY Unsecured Cla   | ims            |   |                   |
| 3. D     | o any creditors have nonpriority unsecured claims again.  No. You have nothing to report in this part. Submit the Yes.   |                | court with your other schedules.  |                   |
| ur<br>If | nsecured claim, list the creditor separately for each claim. For   | each claim lis | of the creditor who holds each claim. If a creditor has more to sted, identify what type of claim it is. Do not list claims already inclaim 3. If you have more than four priority unsecured claims fill out  | luded in Part 1.  |
| 4.1      | CAPITAL ONE  |                |   | \$2,677.00        |
|          | Nonpriority Creditor's Name  |                | Last 4 digits of account number 8592  | <del>+=,=</del> : |
|          | P O Box 30253<br>Number Street   |                | When was the debt incurred? 5/1/2016  |                   |
|          | Salt Lake City Utah 84130 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No            | <br> <br>      | As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  CreditCard |                   |
|          | Yes  |                |   |                   |
| 4.2      | CAPITAL ONE BANK USA N Nonpriority Creditor's Name PO BOX 85520 Number Street  |                | Last 4 digits of account number   | \$3,307.00        |
|          | RICHMOND Virginia 23285 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  No Yes                  |                | As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  CreditCard |                   |
| 4.3      | COMENITYBANK/MEIJER  |                | ast 4 digits of account number  | \$406.00          |
|          | Nonpriority Creditor's Name<br>Po Box 182273   | ,              | When was the debt incurred? 10/1/2016   |                   |
|          | Number Street  Columbus Ohio 43218 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No | <br> <br>      | As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  CreditCard |                   |
|          | Yes  |                |   |                   |

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Debtor 1 Caridad Lopez Case number (if known) Last Name Case number (if known)

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation   | n Page  |             |
|--------|--|---|-------------|
|        | After listing any entries on this page, number them beginning wi   | th 4.5, followed by 4.6, and so forth.  | Total claim |
| 4.4    | DISCOVER FINANCIAL SERVICES  Nonpriority Creditor's Name PO BOX 15316  Number Street   | - Last 4 digits of account number  - When was the debt incurred? 10/1/2016  - As of the date you file, the claim is: Check all that apply.  | \$1,985.00  |
|        | WILMINGTON Delaware 19850 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No  Yes   | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard   |             |
| 4.5    | DSNB MACYS Nonpriority Creditor's Name PO Box 8113 Number Street  Mason Ohio 45040 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes | Last 4 digits of account number 1563 When was the debt incurred? 2/1/2016  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard | \$1,445.00  |
| 4.6    | FNB OMAHA Nonpriority Creditor's Name PO BOX 3412 Number Street  OMAHA Nebraska 68197 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  No Yes        | When was the debt incurred? 12/1/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard                                     | \$1,109.00  |

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Debtor 1 Caridad Lopez Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation                | n Page  |             |
|--------|---|---|-------------|
|        | After listing any entries on this page, number them beginning w | ith 4.5, followed by 4.6, and so forth.   | Total claim |
| 4.7    | FNB OMAHA   | - Last 4 digits of account number   | \$371.00    |
|        | Nonpriority Creditor's Name<br>PO BOX 3412                      | When was the debt incurred? 11/1/2015   |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | - Contingent  |             |
|        | OMAHA Nebraska 68197 City State Zip Code                        | - Unliquidated  |             |
|        | Who incurred the debt? Check one.                               | Disputed  |             |
|        | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or  |             |
|        | At least one of the debtors and another                         | divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar |             |
|        | Check if this claim relates to a community debt                 | debts   |             |
|        | Is the claim subject to offset?                                 | Other. Specify CreditCard   |             |
|        | ✓ No  |   |             |
|        | Yes   |   |             |
| 4.8    | Paypal Buyer Credit Nonpriority Creditor's Name                 | - Last 4 digits of account number   | \$2,301.63  |
|        | PO Box 960080   | When was the debt incurred?n/a  |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | - Contingent  |             |
|        | Orlando Florida 32896   | Unliquidated  |             |
|        | City State Zip Code   | Disputed  |             |
|        | Who incurred the debt? Check one.  Debtor 1 only                | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or divorce that you did not report as priority claims         |             |
|        | At least one of the debtors and another                         | Debts to pension or profit-sharing plans, and other similar   |             |
|        | Check if this claim relates to a community debt                 | debts  Other. Specify  Credit Card Bill   |             |
|        | Is the claim subject to offset?                                 | Other. Specify Credit Card Bill   |             |
|        | <b>✓</b> No   |   |             |
|        | Yes   |   |             |
| 4.9    | SYNCB/AMAZON  | - Last 4 digits of account number 8726  | \$732.00    |
|        | Nonpriority Creditor's Name<br>PO BOX 965015                    | When was the debt incurred? 2/1/2016  |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | Contingent  |             |
|        | ORLANDO Florida 32896   | - Unliquidated  |             |
|        | City State Zip Code  Who incurred the debt? Check one.          | Disputed  |             |
|        | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or  |             |
|        | At least one of the debtors and another                         | divorce that you did not report as priority claims  |             |
|        | Check if this claim relates to a community debt                 | Debts to pension or profit-sharing plans, and other similar debts   |             |
|        | Is the claim subject to offset?                                 | ✓ Other. Specify CreditCard   |             |
|        | <b>✓</b> No   |   |             |
|        | Yes   |   |             |

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 SYNCB/SAMS \$216.00 Last 4 digits of account number 0182 Nonpriority Creditor's Name 4125 WINDWARD PLAZA When was the debt incurred? 5/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30005 ALPHARETTA Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.11 SYNCB/SAMS CLUB \$322.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 981400 When was the debt incurred? 5/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent EL PASO 79998 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes SYNCB/WALMAR 4.12 \$657.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965024 When was the debt incurred? 4/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent EL PASO 79998 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset? No **|** 

Yes

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/WALMART 4.13 \$752.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 981400 When was the debt incurred? 4/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **EL PASO** 79998 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.14 TD BANK USA/TARGETCRED \$358.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 673 When was the debt incurred? 5/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS Minnesota 55440 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify \_\_\_\_ CreditCard Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Caridad Lopez Case number (if known)

| First Nar                | ne Middle Name Last Name   |         |                           |         |
|--------------------------|--|---------|---------------------------|---------|
| Part 4: Add th           | ne Amounts for Each Type of Unsecured Claim  |         |                           |         |
|                          | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | s for s | tatistical reporting purp | oses on |
|                          |  |         | Total claims              |         |
| Total claims from Part 1 | 6a. Domestic support obligations.  | 6a.     | \$0.00                    |         |
|                          | 6b. Taxes and certain other debts you owe the government   | 6b.     | \$0.00                    |         |
|                          | 6c. Claims for death or personal injury while you were intoxicated   | 6c.     | \$0.00                    |         |
|                          | 6d. Other. Add all other priority unsecured claims. Write that   | 6d.     | \$0.00                    |         |
|                          | amount here.  6e. Total. Add lines 6a through 6d.  | 6e.     | \$0.00                    |         |
|                          | oo. Totali. Add mies va tinough ou.  | 06.     |                           |         |
|                          |  |         | Total claims              |         |
| Total claims from Part 2 | 6f. Student loans  | 6f.     | \$0.00                    |         |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.     | \$0.00                    |         |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts  | 6h.     | \$0.00                    |         |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write   | 6i.     | \$16,638.63               |         |
|                          | that amount here.  | •       |                           |         |
|                          | 6i Total Add lines 6f through 6i   | 6i      | \$16,638.63               |         |

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| Fill in this information to identify your case: |                           |             |                              |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1  | Caridad                   |             | Lopez                        |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |
| Debtor 2  |                           |             |                              |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |
| Case number (If known)                          |                           |             | ()                           |  |  |  |

#### Official Form 106G

### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or compar                        | ny with whom you have | the contract or lease | State what the contract or lease is for           |
|-----|---|-----------------------|-----------------------|---|
| 2.1 | Life Storage Name 3245 W 30th St Number | Street                |                       | Other,<br>Other,<br>Monthly Storage               |
|     | Chicago                                 | Illinois              | 60623                 |   |
|     | City                                    | State                 | Zip Code              |   |
| 2.2 | Ansari, Ahmad<br>Name                   |                       |                       | Residential Lease,<br>Other,<br>Residential Lease |
|     | 3950 W 85th St                          |                       |                       |   |
|     | Number                                  | Street                |                       |   |
|     | Chicago                                 | Illinois              | 60652                 |   |
|     | City                                    | State                 | Zip Code              |   |

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|                                 |                          | 20   | oumone rago c                 | 72 01 12   |
|---------------------------------|--------------------------|--|-------------------------------|--|
| Fill in this info               | mation to identify your  | case:  |                               |  |
| Debtor 1                        | Caridad                  |  | Lopez                         |  |
|                                 | First Name               | Middle Name  | Last Name                     |  |
| Debtor 2<br>(Spouse, if filing) | First Name               | Middle Name  | Last Name                     |  |
| United States I                 | Bankruptcy Court for the | e: Northern  | District of Illinois          |  |
| omiou otatoo i                  | Jamaapio, Joan Io. an    |  | (State)                       |  |
| Case number (If known)          |                          |  |                               |  |
| , ,                             |                          |  |                               | Check if this is an  |
|                                 |                          |  |                               | amended filing   |
| Official                        | Form 106H                |  |                               |  |
| Sahadul                         | e H: Your Co             | dobtoro  |                               | 10/45  |
| Scriedui                        | e n. Your Co             | deptors  |                               | 12/15  |
| known). Answ                    | er every question.       | you are filing a joint case, do                                |                               | of any Additional Pages, write your name and case number (if   |
| Yes                             |                          |  |                               |  |
|                                 | • •                      | ou lived in a community prop<br>lexico, Puerto Rico, Texas, Wa | - '                           | Community property states and territories include Arizona, California,   |
| ✓ No.                           | Go to line 3.            |  |                               |  |
| Yes                             | Did your spouse, form    | mer spouse, or legal equival                                   | ent live with you at the time | e?   |
| <b>✓</b>                        | No                       |  |                               |  |
|                                 | Yes. In which commu      | nity state or territory did you                                | live?                         | Fill in the name and current address of that person.   |
|                                 | Name of your spouse      | , former spouse, or legal equi                                 | valent                        | —  |
|                                 | Number Street            |  |                               | <u> </u>   |
|                                 | City                     | State  | Zip Code                      | <u> </u>   |
|                                 |                          | _  |                               |  |
| again as                        | a codebtor only if that  | person is a guarantor or co                                    | osigner. Make sure you ha     | our spouse is filing with you. List the person shown in line 2 ve listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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|   |   |  |                       |                  | <b>3</b>  |                     |                               |                        |
|---|---|--|-----------------------|------------------|-----------|---------------------|-------------------------------|------------------------|
| Fill in this in                             | nformation to identify                      | your case:   |                       |                  |           |                     |                               |                        |
| Debtor 1                                    | Caridad                                     |  | Lopez                 |                  |           |                     |                               |                        |
|   | First Name                                  | Middle Name  | Last N                | lame             |           | — Che               | eck if this is:               |                        |
| Debtor 2                                    | g) First Name                               | Middle None  | L oot N               | lama             |           | _                   | An amended filing             |                        |
| (opouse, il lilli)                          | 9) First Name                               | Middle Name  | Last N                |                  |           |                     | A supplement showing po       | et-potition chapter 13 |
|   | s Bankruptcy Court for                      | Northern   | _ District of Illi    |                  |           |                     | expenses as of the following  |                        |
| the:<br>Case numbe                          | r   |  | (8                    | State)           |           |                     | ·                             |                        |
| (If known)                                  |   |  |                       |                  |           |                     | MM / DD / YYYY                |                        |
| Official                                    | Form 106I                                   |  |                       |                  |           |                     |                               |                        |
| Schedu                                      | ıle I: Your İn                              | come   |                       |                  |           |                     |                               | 12/15                  |
| information<br>spouse. If m<br>number (if k | about your spouse. I                        |  | d your spous          | se is n          | ot filing | with you, do        | not include information       | n about your           |
|   | ur employment                               |  | Debtor 1              | l                |           |                     | Debtor 2                      |                        |
| informat                                    | ion.  | Employment status  | <b>✓</b> Emplo        | wed              |           |                     | Employed                      |                        |
|   | ve more than one job,<br>separate page with |  |                       | nploye           | d         |                     | Not Employed                  |                        |
| information about additional                | on about additional                         |  | _                     |                  | -         |                     |                               |                        |
| employer                                    | S.  | Occupation   | P.S.R.                |                  |           |                     | _                             |                        |
|   | art time, seasonal, or oyed work.           | Employer's name  | Advocate I            | Health (         | Care      |                     |                               |                        |
| -   | on may include student                      | Employer's address   | 4220 W. 9             | 4220 W. 95th St. |           |                     |                               |                        |
|   | maker, if it applies.                       |  | Number Str            | reet             |           |                     | Number Street                 |                        |
|   |   |  |                       |                  |           |                     |                               |                        |
|   |   |  | Oak Lawn              | 1                | Illinois  | 60453               |                               |                        |
|   |   |  | City                  |                  | State     | Zip Code            | City S                        | tate Zip Code          |
|   |   | How long employed there?                                   |                       |                  |           |                     |                               |                        |
| Part 2: Gi                                  | ive Details About N                         | Monthly Income   |                       |                  |           |                     |                               |                        |
| Estimate m                                  | nonthly income as of t                      | the date you file this form                                | <b>n.</b> If you have | nothing          | g to repo | ort for any line, v | write \$0 in the space. Inclu | ude your non-filing    |
|   | ess you are separated.                      | e more than one employer,                                  | combine the           | inform           | ation for | all amployare fo    | or that pareon on the lines   | bolow If you need      |
|   | e, attach a separate she                    |  | Combine the           | IIIIOIII         |           |                     | For Debtor 2 or               | below. If you fleed    |
|   |   |  |                       |                  | For       | Debtor 1            | non-filing spouse             |                        |
|   |   | ary, and commissions (befo<br>, calculate what the monthly |                       | 2.               |           | \$3,349.10          |                               | -                      |
| 3. Estima                                   | te and list monthly ove                     | rtime pay.   |                       | 3                |           | + \$0.00            |                               |                        |
| 4. Calcul                                   | ate gross income. Add li                    | ine 2 + line 3.  |                       | 4.               |           | \$3,349.10          |                               | .]                     |

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| Debtor 1Caridad  | Lopez                  | Case number           | r (if                             |                        |
|--|------------------------|-----------------------|-----------------------------------|------------------------|
| First Name Middle Name   | Last Name              | known) For Debtor 1   | For Debtor 2 or non-filing spouse |                        |
| Copy line 4 here   | <b>→</b> 4.            | \$3,349.10            |                                   |                        |
| 5. List all payroll deductions:  |                        |                       |                                   |                        |
| 5a. Tax, Medicare, and Social Security deductions  | 5a.                    | \$698.25              |                                   |                        |
| 5b. Mandatory contributions for retirement plans   | 5b.                    | \$100.47              |                                   |                        |
| 5c. Voluntary contributions for retirement plans   | 5c.                    | \$0.00                |                                   |                        |
| 5d. Required repayments of retirement fund loans   | 5d.                    | \$0.00                |                                   |                        |
| 5e. Insurance  | 5e.                    | \$165.04              |                                   |                        |
| 5f. Domestic support obligations   | 5f.                    | \$0.00                |                                   |                        |
| 5g. <b>Union dues</b>  | 5g.                    | \$0.00                |                                   |                        |
| 5h. Other deductions. Specify:   | 5h. +                  | \$0.00 +              |                                   |                        |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + +5h$ .  | -5f + 5g 6.            | \$963.76              |                                   |                        |
| 7. Calculate total monthly take-home pay. Subtract line 6 from li  | ne 4. 7.               | \$2,385.35            |                                   |                        |
| 8. List all other income regularly received:   |                        |                       |                                   |                        |
| 8a. Net income from rental property and from operating a business, profession, or farm   |                        |                       |                                   |                        |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, at the total monthly net income.   | nd<br>8a. <u> </u>     | \$0.00                |                                   |                        |
| 8b. Interest and dividends   | 8b.                    | \$0.00                |                                   |                        |
| 8c. Family support payments that you, a non-filing spouse, of dependent regularly receive  | or a                   | _                     |                                   |                        |
| Include alimony, spousal support, child support, maintenanc divorce settlement, and property settlement.   | ee,<br>8c. <u>-</u>    | \$0.00                |                                   |                        |
| 8d. Unemployment compensation  | 8d.                    | \$0.00                |                                   |                        |
| 8e. Social Security  | 8e.                    | \$0.00                |                                   |                        |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefunder the Supplemental Nutrition Assistance Program) or housing subsidies Specify:  | iits<br>8f.            | \$0.00                |                                   |                        |
| 8g. Pension or retirement income   | 8g.                    | \$0.00                |                                   |                        |
| 8h. Other monthly income. Specify:   | 8h. +                  | \$0.00 +              |                                   |                        |
| 9. <b>Add all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g   |                        | \$0.00                |                                   |                        |
| 10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing   | 10. spouse             | \$2,385.35 +          | =                                 | \$2,385.35             |
| 11. State all other regular contributions to the expenses that y Include contributions from an unmarried partner, members of yo friends or relatives. Do not include any amounts already included in lines 2-10 or am  | ur household, your d   | ependents, your roomn |                                   |                        |
| Specify:   |                        |                       | 11.                               | + \$0.00               |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S |                        |                       | ,                                 | \$2,385.35<br>Combined |
| 13. Do you expect an increase or decrease within the year after No.  Yes. Explain:   | er you file this form? |                       |                                   | monthly income         |
|  |                        |                       |                                   |                        |

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|  |                                     | Do  | cument Page 34 of   | 72                                   |   |
|--|-------------------------------------|---|---|--------------------------------------|---|
| Fill in this infor                                     | mation to identif                   | y your case:  |   | I                                    |   |
| Debtor 1   | Caridad<br>First Name               | Middle Name   | Lopez<br>Last Name  |                                      |   |
| Debtor 2   | riistivaille                        | Middle Name   | Last Name   | Check if this is:                    |   |
| (Spouse, if filing)                                    | First Name                          | Middle Name   | Last Name   | An amended filing                    |   |
| United States B  | ankruptcy Court                     | for the: Northern   | District of Illinois (State)  | A supplement show expenses as of the | wing post-petition chapter 13 e following date: |
| Case number (If known)                                 |                                     |   | _   | MM / DD / YYYY                       | <u> </u>  |
|  | Form 10                             | 6J<br>Expenses  |   | _                                    | 12/15   |
| Be as complete<br>information. If a<br>(if known). Ans | e and accurate                      | as possible. If two married peopl<br>eeded, attach another sheet to t<br>ion. | e are filing together, both are equinity his form. On the top of any additi |                                      |   |
| 1. Is this a join                                      |                                     | doorioid  |   |                                      |   |
|  |                                     |   |   |                                      |   |
|  | o to line 2<br>Des Debtor 2 live    | e in a separate household?  |   |                                      |   |
|  | No                                  | ·   |   |                                      |   |
|  | Yes. Debtor 2                       | must file Official Forms 106J-2, Ex   | penses for Separate Household of D  | Debtor 2.                            |   |
| 2. Do you have   | e dependents?                       | <b>✓</b> No   |   |                                      |   |
| Do not list D<br>Debtor 2.                             | ebtor 1 and                         | Yes. Fill out this information f each dependent                               | Or Dependent's relationship to Debtor 1 or Debtor 2                         | -                                    | Does dependent live with you?                   |
| expenses of  | enses include<br>f people other     | <b>✓</b> No   |   |                                      |   |
| than<br>yourself and<br>dependents                     |                                     | Yes   |   |                                      |   |
| Part 2: Estir  | nate Your On                        | going Monthly Expenses  |   |                                      |   |
| _  | of a date after th                  |   | ss you are using this form as a su<br>supplemental Schedule J, check        |                                      |   |
|  | •                                   | h non-cash government assistan<br>luded it on <i>Schedule I: Your Inco</i>    | -   |                                      | Your expenses                                   |
|  | or home owner<br>or the ground or l |   | . Include first mortgage payments a   | ınd                                  | <b>\$975.00</b>                                 |
| If not incl  | uded in line 4:                     |   |   |                                      |   |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Caridad Lopez Case number (if known) Last Name

| riist Name   | Mildule Name Last Name   |            |                  |
|--|--|------------|------------------|
|  |  |            | Your expenses    |
| 5. Additional mortgage payme                                       | nts for your residence, such as home equity loans  | 5.         | \$0.00           |
| 6. Utilities:  |  |            |                  |
| 6a. Electricity, heat, natural ga                                  | as a second of the second of t | 6a.        | \$150.00         |
| 6b. Water, sewer, garbage co                                       | llection   | 6b.        | \$0.00           |
| 6c. Telephone, cell phone, In                                      | ternet, satellite, and cable services  | 6c.        | \$175.00         |
| 6d. Other. Specify:  |  | 6d         | \$0.00           |
| 7. Food and housekeeping sup                                       | plies  | 7.         | \$250.00         |
| 8. Childcare and children's ed                                     | ucation costs  | 8.         | \$0.00           |
| 9. Clothing, laundry, and dry c                                    | leaning  | 9.         | \$100.00         |
| 10. Personal care products an                                      | d services   | 10.        | \$90.00          |
| 11. Medical and dental expens                                      | ses  | 11.        | \$50.00          |
| 12. <b>Transportation.</b> Include gas Do not include car payments |  | 12.        | \$150.00         |
| 13. Entertainment, clubs, recr                                     | eation, newspapers, magazines, and books   | 13.        | \$0.00           |
| 14. Charitable contributions a                                     | nd religious donations   | 14.        | \$0.00           |
| 15. <b>Insurance.</b> Do not include insurance ded                 | ucted from your pay or included in lines 4 or 20.  |            |                  |
| 15a. Life insurance  |  | 15a        | \$0.00           |
| 15b. Health insurance  |  | 15b        | \$0.00           |
| 15c. Vehicle insurance   |  | 15c        | \$110.00         |
| 15d. Other insurance. Specify                                      | r <u>.                                    </u>   | 15d        | \$0.00           |
| 16. <b>Taxes.</b> Do not include taxes                             | deducted from your pay or included in lines 4 or 20.   |            |                  |
| Specify:   |  | 16         | \$0.00           |
| 17. Installment or lease payme                                     | ents:  | 10         |                  |
| 17a. Car payments for Vehicle                                      |  | 17a        | \$0.00           |
| 17b. Car payments for Vehicle                                      | e 2  | 17b        | \$0.00           |
| 17c. Other. Specify:   |  | 17c        | \$0.00           |
|  |  | 17d        | \$0.00           |
|  | maintenance, and support that you did not report as deducted from  |            | \$0.00           |
|  | lle I, Your Income (Official Form 106I).   | 18.        |                  |
|  | to support others who do not live with you.  |            |                  |
| Specify:   |  | 19.        | \$0.00           |
| 20. Other real property expens 20a. Mortgages on other pro         | es not included in lines 4 or 5 of this form or on Schedule I: Your Income.  | 200        | <b>\$0.00</b>    |
| 20b. Real estate taxes.  |  | 20a<br>20b | \$0.00<br>\$0.00 |
| 20c. Property, homeowner's,  | or renter's insurance  |            |                  |
| 20d. Maintenance, repair, and                                      |  | 20c<br>20d | \$0.00<br>\$0.00 |
| 20e. Homeowner's association                                       |  |            |                  |
| 200. Homeowner 3 associatio  | ni oi oonaominiami aaco  | 20e        | \$0.00           |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 Caridad   |  | Lopez       | Case number (if known) |     |             |
|--|--|-------------|------------------------|-----|-------------|
| First Name   | Middle Name  | Last Name   |                        |     |             |
| 21. Other. Specify: Store  | age Unit   |             |                        | 21  | \$45.00     |
| 00. Oalaulata usuu maan  | Alaba assassas   |             |                        |     |             |
| 22. Calculate your mon   | • •  |             |                        |     | \$2,095.00  |
| 22a. Add lines 4 throu   |  |             |                        |     | \$0.00      |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 |  |             |                        |     | \$2,095.00  |
| 22c. Add line 22a and  | I 22b. The result is your monthly exp  | penses.     |                        | 22. |             |
| 23. Calculate your mont  | thly net income.   |             |                        |     |             |
| 23a. Copy line 12 (yo  | ur combined monthly income) from   | Schedule I. |                        | 23a | \$2,385.35  |
| 23b. Copy your mont  | thly expenses from line 22 above.  |             |                        | 23b | \$2,095.00  |
|  | onthly expenses from your monthly  | income.     |                        |     | \$290.35    |
| The result is you  | r monthly net income.  |             |                        | 23c | <del></del> |
|  | expect to finish paying for your car o increase or decrease because of a here: |             |                        |     |             |

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| Fill in this infor     | mation to identify your c | ase:        |                      |  |
|------------------------|---------------------------|-------------|----------------------|--|
| Debtor 1               | Caridad                   |             | Lopez                |  |
|                        | First Name                | Middle Name | Last Name            |  |
| Debtor 2               |                           |             |                      |  |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            |  |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois |  |
|                        |                           |             | (State)              |  |
| Case number (If known) |                           |             |                      |  |

### Official Form 106Dec

## Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |  |
|-----|--|---|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                  | nelp you fill out bankruptcy forms?   |  |
|     | ✓ No   |   |  |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |
|     |  |   |  |
|     |  |   |  |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and   |  |
| x   | /s/ Caridad Lopez  | <b>x</b>  |  |
| ~   | Signature of Debtor 1  | Signature of Debtor 2   |  |
|     | Date 2/22/2017   | Date  |  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |  |

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| Debtor 1               | Caridad   |                            |                                      |                                | Lopez                |   |                               |          |   |                 |
|------------------------|---|----------------------------|--------------------------------------|--------------------------------|----------------------|---|-------------------------------|----------|---|-----------------|
| Debtor 2               | First Nar   | ne                         | Middle                               | Name                           | Last Name            | ı   |                               |          |   |                 |
| Spouse, if fi          | iling) First Nar  | ne                         | Middle                               | Name                           | Last Name            | 1   |                               |          |   |                 |
| United Sta             | ates Bankruptcy   | Court for the              | : Northern                           | !                              | District of Illinois |   |                               |          |   |                 |
| Case nun<br>[If known) | nber  |                            |                                      |                                | (Glato)              |   |                               |          |   |                 |
| Offici                 | al Form   | 107                        |                                      |                                |                      |   |                               |          | Check if amende                                     |                 |
|                        |   |                            | al Affairs 1                         | for Indi                       | viduale F            | ilina foi                                       | Rankrı                        | intev    |   | 12,             |
| nformati<br>umber (    | ion. If more s<br>if known). An   | oace is need<br>swer every | led, attach a sep                    | parate sheet                   | to this form.        | On the top o                                    |                               |          | or supplying correct<br>ite your name and ca        | se              |
| Part 1:                | Give Details  | About You                  | iviaritai Status                     | s and whier                    | e fou Liveu i        | belore  |                               |          |   |                 |
| 1. Wh                  | at is your curr   | ent marital s              | tatus?                               |                                |                      |   |                               |          |   |                 |
|                        | Married   |                            |                                      |                                |                      |   |                               |          |   |                 |
|                        |   |                            |                                      |                                |                      |   |                               |          |   |                 |
| <u>✓</u>               | Not married   |                            |                                      |                                |                      |   |                               |          |   |                 |
| _                      |   | veare have v               | you lived anywher                    | re other than                  | n where you live     | a now?  |                               |          |   |                 |
|                        | ring the last 3   | years, have y              | ou lived anywher                     | re other than                  | n where you live     | e now?  |                               |          |   |                 |
| _                      | ring the last 3   |                            | -                                    |                                |                      |   |                               |          |   |                 |
| _                      | ring the last 3   |                            | ou lived anywher ou lived in the las |                                |                      |   | now.                          |          |   |                 |
| _                      | ring the last 3   |                            | -                                    | st 3 years. Do                 |                      |   | now.                          |          | Dates Debtor 2 there                                | ved             |
| _                      | ring the last 3<br>No<br>Yes. List all o  |                            | -                                    | st 3 years. Do                 | o not include w      | here you live r                                 | now.<br>s Debtor 1            |          |   |                 |
|                        | ring the last 3<br>No<br>Yes. List all o  | f the places y             | -                                    | ot 3 years. Do  Dates De there | o not include w      | here you live r                                 |                               |          | there Same as Deb                                   |                 |
|                        | ring the last 3<br>No<br>Yes. List all o  | f the places y             | -                                    | Dates De there                 | o not include w      | here you live r                                 | s Debtor 1                    |          | Same as Deb   |                 |
|                        | ring the last 3  No Yes. List all o  Debtor 1:  | f the places y             | -                                    | Dates De there                 | o not include w      | Debtor 2:                                       | s Debtor 1                    |          | there Same as Deb                                   |                 |
| _                      | ring the last 3  No Yes. List all o  Debtor 1:  9341 S. Pulas Number Stree  Evergreen Park      | f the places y             | -                                    | Dates De there                 | o not include w      | Debtor 2:                                       | s Debtor 1                    | Zip Code | Same as Deb   |                 |
|                        | ring the last 3  No Yes. List all o  Debtor 1:  9341 S. Pulas Number Stree  Evergreen           | f the places y             | ou lived in the las                  | Dates De there                 | o not include w      | Debtor 2:  Same as  Number Stre                 | s Debtor 1<br>eet             | Zip Code | Same as Deb   |                 |
|                        | ring the last 3  No Yes. List all o  Debtor 1:  9341 S. Pulas Number Stree  Evergreen Park      | f the places y             | ou lived in the las                  | Dates De there                 | o not include w      | Debtor 2:  Same as  Number Stree                | s Debtor 1<br>eet             | Zip Code | Same as Deb   | tor 1<br>-<br>- |
|                        | ring the last 3  No Yes. List all o  Debtor 1:  9341 S. Pulas Number Stree  Evergreen Park      | f the places y             | ou lived in the las                  | Dates De there                 | o not include w      | Debtor 2:  Same as  Number Stree                | S Debtor 1  State  S Debtor 1 | Zip Code | there Same as Deb From To                           | tor 1<br>-<br>- |
|                        | ring the last 3  No Yes. List all o  Debtor 1:  9341 S. Pulas Number Stree  Evergreen Park City | f the places y             | ou lived in the las                  | Dates De there  From To 07     | o not include w      | Debtor 2:  Same as  Number Stree  City  Same as | S Debtor 1  State  S Debtor 1 | Zip Code | there  Same as Deb  From To  Same as Deb            | tor 1<br>-<br>- |
|                        | ring the last 3  No Yes. List all o  Debtor 1:  9341 S. Pulas Number Stree  Evergreen Park City | f the places y             | ou lived in the las                  | Dates De there  From To        | o not include w      | Debtor 2:  Same as  Number Stree  City  Same as | S Debtor 1  State  S Debtor 1 | Zip Code | there  Same as Deb  From To  Same as Deb  From From | tor 1<br>-<br>- |

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$4739.99 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$39315.69 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$33870.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Debtor 1 Caridad Lopez \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1             | Caridad                                |  |   | Lo  | pez  | Case number                                 | (if known)   |
|-------------------|--|--|---|---|--|---|--|
|                   | First Name                             |  | Middle Name   | Las                                       | t Name                                       |   |  |
| nsi<br>con<br>age | ders include your<br>porations of whic | relatives; a<br>n you are a<br>for a busin | ny general partners<br>n officer, director, pess you operate as | s; relatives of any<br>person in control, | general partners; part<br>or owner of 20% or | nerships of which y<br>more of their voting | who was an insider? ou are a general partner; g securities; and any managing domestic support obligations, |
| <b>✓</b>          | No                                     |  |   |   |  |   |  |
|                   | Yes. List all pay                      | ments to a                                 | an insider.   |   |  |   |  |
|                   |  |  |   | Dates of payment                          | Total amount paid                            | Amount you still owe                        | Reason for this payment  |
|                   | Insider's Name                         |  |   |   |  |   |  |
|                   | Number Street                          |  |   |   |  |   |  |
|                   | City                                   | State                                      | Zip Code  |   |  |   |  |
|                   | Insider's Name                         |  |   |   |  |   |  |
|                   | Number Street                          |  |   |   |  |   |  |
|                   | Cit.                                   | 01-1-                                      | 7:- 0- 4-   |   |  |   |  |
|                   | City                                   | State                                      | Zip Code  |   |  |   |  |
| insi              | der?<br>ude payments on<br>No          | debts gua                                  | ranteed or cosigne  | d by an insider.                          | Total amount paid                            | Amount you still owe                        | n account of a debt that benefited an  Reason for this payment  Include creditor's name                    |
|                   | Insider's Name                         |  |   |   |  |   |  |
|                   | Number Street                          |  |   |   |  |   |  |
|                   | City                                   | State                                      |   |   |  |   |  |
|                   |  |  | Zip Code  |   |  |   |  |
|                   | Insider's Name                         |  | Zip Code  |   |  |   |  |
|                   | Insider's Name  Number Street          |  | Zip Code  |   |  |   |  |
|                   |  | State                                      | Zip Code  |   |  |   |  |

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | or 1                   | Caridad   |                        | Lopez                       | Case number (if known)        |                          |                     |
|------|------------------------|---|------------------------|-----------------------------|-------------------------------|--------------------------|---------------------|
|      |                        | First Name  | Middle Name            | Last Name                   |                               |                          |                     |
| 11.  |                        | hin 90 days before you file<br>counts or refuse to make a |                        |                             | ank or financial institution, | set off any amou         | unts from your      |
|      | V                      | No  |                        |                             |                               |                          |                     |
|      | H                      | Yes. Fill in the details.                                 |                        |                             |                               |                          |                     |
|      | Ш                      | res. I ili ili tre details.                               |                        |                             |                               |                          |                     |
|      |                        |   |                        | Describe the action th      | e creditor took               | Date action was taken    | Amount              |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | Creditor's Name   |                        |                             |                               |                          |                     |
|      |                        | Number Street   |                        |                             |                               |                          |                     |
|      |                        |   |                        | Last 4 digits of account    | number XXXV                   |                          |                     |
|      |                        |   |                        | Last 4 digits of account    | Idiliber. XXXX-               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | City State  | Zip Code               |                             |                               |                          |                     |
|      |                        | ,   | _p                     |                             |                               |                          |                     |
| 12.  |                        | hin 1 year before you filed<br>ointed receiver, a custodi |                        |                             | possession of an assignee fo  | r the benefit of         | creditors, a court- |
|      |                        | Nie   |                        |                             |                               |                          |                     |
|      | $ldsymbol{\checkmark}$ | No  |                        |                             |                               |                          |                     |
|      |                        | Yes   |                        |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
| Part | 5:                     | List Certain Gifts and C                                  | Contributions          |                             |                               |                          |                     |
| 13.  | Wi                     | thin 2 years before you file                              | ed for bankruptcy, did | you give any gifts with a t | otal value of more than \$600 | per person?              |                     |
|      | <b>~</b>               | No  |                        |                             |                               |                          |                     |
|      | Ě                      | J.  | anah aift              |                             |                               |                          |                     |
|      |                        | Yes. Fill in the details for                              | each girt.             |                             |                               |                          |                     |
|      |                        | Gifts with a total value o<br>per person                  | f more than \$600      | Describe the gifts          |                               | Dates you gave the gifts | Value               |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | David a to William Val. Call                              | - th - O:ft            |                             |                               |                          |                     |
|      |                        | Person to Whom You Gave                                   | e the Gift             |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | Number Street   |                        |                             |                               |                          |                     |
|      |                        | City State  | Zip Code               |                             |                               |                          |                     |
|      |                        |   | •                      |                             |                               |                          |                     |
|      |                        | Person's relationship to you                              | u                      |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | Person to Whom You Gave                                   | the Gift               |                             |                               |                          |                     |
|      |                        | rototi to vinom rou dave                                  | o ti lo diit           |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | Number Street   |                        |                             |                               |                          |                     |
|      |                        |   |                        |                             |                               |                          |                     |
|      |                        | City State  | Zip Code               |                             |                               |                          |                     |
|      |                        | Person's relationship to you                              | u                      |                             |                               |                          |                     |
|      |                        |   | -                      |                             |                               |                          |                     |

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| ebtor 1 | Caridad  |  | Lopez   | Case number (if know)  | 7)                                |                        |
|---------|--|--|---|------------------------|-----------------------------------|------------------------|
|         | First Name   | Middle Name  | Last Name   | ,                      |                                   |                        |
|         |  |  |   |                        |                                   |                        |
| . Wit   | hin 2 years before you filed for   | bankruptcy, did  | you give any gifts or contributions   | with a total value o   | f more than \$600                 | to any charity?        |
|         | No   |  |   |                        |                                   |                        |
| ✓       | No   |  |   |                        |                                   |                        |
|         | Yes. Fill in the details for each  | gift or contribution   | on.   |                        |                                   |                        |
|         | Gifts or contributions to chari  | ties   | Describe what you contributed   |                        | Date you                          | Value                  |
|         | that total more than \$600   | lies   | Describe what you contributed   |                        | contributed                       | Value                  |
|         | that total more than \$600   |  |   |                        | Contributed                       |                        |
|         |  |  |   |                        |                                   |                        |
|         | Charity's Name   |  |   |                        |                                   |                        |
|         |  |  |   |                        |                                   |                        |
|         |  |  |   |                        |                                   |                        |
|         | Number Street  |  |   |                        |                                   |                        |
|         | Number Greet   |  |   |                        |                                   |                        |
|         | City State   | Zip Code   |   |                        |                                   |                        |
|         | Oity State   | Zip Oode   |   |                        |                                   |                        |
| c.      | List Certain Losses  |  |   |                        |                                   |                        |
| . 0.    |  |  |   |                        |                                   |                        |
|         | Yes. Fill in the details.  Describe the property you lost how the loss occurred  | t and  | Describe any insurance covera<br>Include the amount that insurance                              | e has paid. List       | Date of your loss                 | Value of property lost |
|         |  |  | pending insurance claims on line  | 33 of Schedule         |                                   |                        |
|         |  |  | A/B: Property.  |                        |                                   |                        |
|         |  |  |   |                        |                                   |                        |
|         |  |  |   |                        |                                   |                        |
| Wit     |  | ankruptcy, did y   | ou or anyone else acting on your be   | ehalf pay or transfe   | r any property to a               | anyone you consulte    |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepa   | ankruptcy, did y<br>aring a bankrupt   |   |                        |                                   | anyone you consulte    |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepa   | ankruptcy, did y<br>aring a bankrupt   | cy petition?  |                        |                                   | anyone you consulte    |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet  | ankruptcy, did y<br>aring a bankrupt   | cy petition?  |                        |                                   | anyone you consulte    |
| . Wit   | hin 1 year before you filed for be<br>out seeking bankruptcy or prepa<br>ude any attorneys, bankruptcy pet   | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service   | es required in your ba | nkruptcy.                         |                        |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pro            | es required in your ba | nkruptcy.  Date payment           | Amount of              |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service   | es required in your ba | Date payment or transfer          |                        |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pro            | es required in your ba | nkruptcy.  Date payment           | Amount of              |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pro            | es required in your ba | Date payment or transfer          | Amount of              |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.   | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue  | ankruptcy, did y<br>aring a bankrupt   | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois  | ankruptcy, did yaring a bankrupt tition preparers, or                            | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  | ankruptcy, did y<br>aring a bankrupt<br>tition preparers, or                     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State   | ankruptcy, did yaring a bankrupt tition preparers, or                            | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois  | ankruptcy, did yaring a bankrupt tition preparers, or                            | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State Email or website address  | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State   | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State Email or website address  | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State Email or website address  | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepared any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment,  | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepared any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment,  | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid                            | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid                            | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid  Number Street             | ankruptcy, did yering a bankrupt tition preparers, or 60643  Zip Code            | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| Wit     | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid                            | ankruptcy, did yaring a bankrupt<br>ition preparers, or<br>60643<br>Zip Code     | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid  Number Street  City State | ankruptcy, did yering a bankrupt tition preparers, or 60643  Zip Code            | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid  Number Street             | ankruptcy, did yering a bankrupt tition preparers, or 60643  Zip Code            | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |
| . Wit   | hin 1 year before you filed for bout seeking bankruptcy or prepaude any attorneys, bankruptcy pet No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Payment, Person Who Was Paid  Number Street  City State | ankruptcy, did yaring a bankrupt tition preparers, or 60643 Zip Code  if Not You | cy petition? credit counseling agencies for service Description and value of any pretransferred | es required in your ba | Date payment or transfer was made | Amount of payment      |

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| Debt |             | Caridad   |  | Lopez  | Case number (if known)     |  |                                 |
|------|-------------|---|--|--|----------------------------|--|---------------------------------|
|      |             | First Name  | Middle Name  | Last Name  |                            |  |                                 |
|      | help        | hin 1 year before you filed<br>by you deal with your credit<br>not include any payment or t | tors or to make payme                              |  | ur behalf pay or transfer  | any property to an                         | yone who promised to            |
|      |             | No<br>Yes. Fill in the details.   |  |  |                            |  |                                 |
|      | _           |   |  | Description and value of an transferred          | y property                 | Date<br>payment or<br>transfer was<br>made | Amount of payment               |
|      |             | Person Who Was Paid   |  |  |                            |  |                                 |
|      |             | Number Street   |  |  |                            |  |                                 |
|      |             | City State  | Zip Code   |  |                            |  |                                 |
|      | the<br>Incl | ordinary course of your bu  | usiness or financial af<br>and transfers made as s | ecurity (such as the granting of a               |                            |  |                                 |
|      |             |   |  | Description and value of an property transferred |                            | property or<br>ceived or debts pai         | Date<br>id transfer was<br>made |
|      |             | Person Who Received Tran  | sfer   |  |                            |  |                                 |
|      |             | Number Street   |  |  |                            |  |                                 |
|      |             | City State<br>Person's relationship to you  | Zip Code<br>u                                      |  |                            |  |                                 |
|      |             | Person Who Received Tran  | sfer   |  |                            |  |                                 |
|      |             | Number Street   |  |  |                            |  |                                 |
|      |             | City State<br>Person's relationship to you  | Zip Code<br>u                                      |  |                            |  |                                 |
|      | ben         | hin 10 years before you file<br>eficiary?<br>ese are often called asset-pro                 |  | you transfer any property to a                   | self-settled trust or simi | lar device of which                        | n you are a                     |
|      |             | Yes. Fill in the details.   |  | Description and value of the                     | ne property transferred    |  | Date<br>transfer was<br>made    |
|      |             | Name of trust   |  |  |                            |  |                                 |

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Debtor 1 Caridad Lopez Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Life Storage No Name of Storage Facility Name 3245 W 30th St Number Street Number Street City State Zip Code Chicago Illinois 60623 State Zip Code City

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Debtor 1 Caridad Lopez \_ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt |                          | Caridad   |   |   | Lopez  | Case nu  | umber <i>(if k</i> | nown)        |                 |                    |
|------|--------------------------|---|---|---|--|--|--------------------|--------------|-----------------|--------------------|
|      |                          | First Name  |   | Middle Name   | Last Name  |  |                    |              |                 |                    |
| 26.  | Hav                      | e you been a part                                       | y in any judi   | cial or administr   | rative proceeding under  | r any environmental                            | law? Inc           | lude settlen | nents and orde  | ers.               |
|      | Ħ                        | Yes. Fill in the det                                    | tails   |   |  |  |                    |              |                 |                    |
|      | ш                        | 100.1       11    10    00                              | iciio.  |   | •  |  |                    |              |                 |                    |
|      |                          |   |   |   | Court or agency  | '  | Nature of          | the case     |                 | Status of the case |
|      |                          | Case title  |   |   |  |  |                    |              |                 | ouse               |
|      |                          | - Case title  |   |   |  |  |                    |              |                 | Pending            |
|      |                          |   |   |   | Court Name   |  |                    |              |                 |                    |
|      |                          |   |   |   | NumberStreet   |  |                    |              |                 | On appeal          |
|      |                          | Case number   |   |   | Trumber officet  |  |                    |              |                 | Concluded          |
|      |                          |   |   |   | City State   | Zip Code                                       |                    |              |                 |                    |
|      |                          | •   |   |   | ,  |  |                    |              |                 |                    |
| Part | 11:                      | Give Details Al   | oout Your I   | Business or Co  | onnections to Any Bu   | ısiness  |                    |              |                 |                    |
| 27.  | Witl                     | A sole propri A member of A partner in a An officer, di | etor or self-e<br>f a limited lia<br>a partnership<br>rector, or ma | employed in a tra<br>bility company (L<br>p<br>anaging executiv | d you own a business or<br>ade, profession, or othe<br>LC) or limited liability pay<br>we of a corporation<br>equity securities of a cor | er activity, either full-t<br>artnership (LLP) |                    |              | o any business  | ?                  |
|      |                          | NI N                | L   | . O. I. D. I.10   |  |  |                    |              |                 |                    |
|      | $\underline{\mathbf{M}}$ | No. None of the a                                       |   |   |  |  |                    |              |                 |                    |
|      |                          | Yes. Check all tha                                      | at apply abo  | ve and fill in the  | details below for each   | business.                                      |                    |              |                 |                    |
|      |                          |   |   |   | Describe the nat   | ure of the business                            |                    |              | dentification n |                    |
|      |                          |   |   |   |  |  |                    | include Soc  | cial Security n | umber or IIIN.     |
|      |                          | Business Name   |   |   |  |  |                    | EIN:         |                 |                    |
|      |                          | Dusiness Name   |   |   |  |  |                    |              |                 |                    |
|      |                          | Number Street   |   |   | _  |  |                    | Dates busin  | ness existed    |                    |
|      |                          |   |   |   | Name of account  | tant or bookkeeper                             |                    |              |                 |                    |
|      |                          | City  | State   | Zip Code  |  |  |                    | From         | То              |                    |
|      |                          |   |   |   |  |  |                    |              |                 |                    |
|      |                          |   |   |   | Describe the nat   | ure of the business                            |                    |              | dentification n |                    |
|      |                          | Business Name   |   |   | _  |  |                    | EIN:         |                 |                    |
|      |                          | Dusiness Name   |   |   |  |  |                    |              |                 |                    |
|      |                          | Number Street   |   |   |  |  |                    | Dates busin  | ness existed    |                    |
|      |                          |   |   |   | Name of account  | tant or bookkeeper                             |                    |              |                 |                    |
|      |                          | City  | State   | Zip Code  | _  |  |                    | From         | To              |                    |
|      |                          | •   |   |   |  |  |                    |              |                 |                    |
|      |                          |   |   |   |  |  |                    |              |                 |                    |
|      |                          |   |   |   |  |  |                    |              |                 |                    |
|      |                          |   |   |   | Describe the nat   | ure of the business                            |                    | Employer Id  | dentification n | umber Do not       |
|      |                          |   |   |   |  |  |                    |              | cial Security n |                    |
|      |                          |   |   |   |  |  |                    | EIN:         |                 |                    |
|      |                          | Business Name   | ·   |   |  |  |                    |              |                 |                    |
|      |                          | N Or  |   |   | _  |  |                    | Dates bust   |                 |                    |
|      |                          | Number Street   |   |   | Name of access   | tant or hockkoons                              |                    | Dates busin  | ness existed    |                    |
|      |                          | City  | Ctata   | 7in 0-1-  | — iname of account   | tant or bookkeeper                             |                    |              |                 |                    |
|      |                          | City  | State   | Zip Code  |  |  |                    | From         | To              |                    |
|      |                          |   |   |   |  |  |                    |              |                 |                    |
|      |                          |   |   |   |  |  |                    |              |                 |                    |
|      |                          |   |   |   |  |  |                    |              |                 |                    |

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| Debtor   | 1 Caridad   |                          | Lopez                          | Case number (if known)   |
|----------|---|--------------------------|--------------------------------|--|
|          | First Name  | Middle Name              | Last Name                      |  |
|          | Vithin 2 years before you filed reditors, or other parties. | d for bankruptcy, did yo | u give a financial statemen    | t to anyone about your business? Include all financial institutions,   |
|          | Yes. Fill in the details belo                               | W.                       |                                |  |
|          |   |                          | Date issued                    |  |
|          | -   |                          | MATERIA (1997)                 |  |
|          | Name  |                          | MM/DD/YYYY                     |  |
|          | Number Street   |                          | -                              |  |
|          |   |                          |                                |  |
|          | City State  | Zip Code                 | -                              |  |
| Part 12  | 2: Sign Below   |                          |                                |  |
| tru      | e and correct. I understand                                 | that making a false stat | ement, concealing property     | nts, and I declare under penalty of perjury that the answers are<br>y, or obtaining money or property by fraud in connection with<br>0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|          | /s/ Caridad I   | 0007                     |                                | <b>x</b>   |
|          | Signature of De   |                          |                                | Signature of Debtor 2  |
|          | J   |                          |                                | Date   |
|          | Date 2/22/201   | 7                        |                                |  |
| Did      | d you attach additional pages                               | s to Your Statement of   | Financial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)?  |
|          | No  |                          |                                |  |
|          | Yes   |                          |                                |  |
| ш        | 100   |                          |                                |  |
| Did      | d you pay or agree to pay son                               | neone who is not an att  | orney to help you fill out ba  | nkruptcy forms?  |
| <b>✓</b> | No  |                          |                                |  |
|          | Yes. Name of person   |                          |                                | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  |

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

|           |  | Northe           | em District of Illinois       |                       |                                |
|-----------|--|------------------|-------------------------------|-----------------------|--------------------------------|
| n re<br>_ | Caridad Lopez  Debtor  |                  |                               | Case No.              | (If known)                     |
|           | Depioi   |                  |                               | Chapter               | Chapter 13                     |
| 1         | DISCLOSURE OF CO.  Pursuant to 11 U.S.C. § 329(a) and Fed. compensation paid to me within one year   | . Bankr. P. 201  | 6(b), I certify that I am the | e attorney for the ab | ovenamed debtor(s) and that    |
|           | rendered or to be rendered on behalf of  | the debtor(s) in |                               |                       | bankruptcy case is as follows: |
|           | For legal services, I have agreed to accep   | •                |                               |                       | \$4,000.00                     |
|           | Prior to the filing of this statement I have   | e received       |                               |                       | \$350.00                       |
|           | Balance Due  |                  |                               |                       | \$3,650.00                     |
| 2         | . The source of the compensation paid to   | me was:          |                               |                       |                                |
|           | <b>✓</b> Debtor  | Othe             | er (specify)                  |                       |                                |
| 3         | . The source of the compensation paid to   | me is:           |                               |                       |                                |
|           | <b>✓</b> Debtor  | Othe             | er (specify)                  |                       |                                |
| 4         | I have not agreed to share the above members and associates of my law  |                  | mpensation with any oth       | er person unless the  | ey are                         |
|           | I have agreed to share the above-dismembers or associates of my law fir the people sharing in the compensa   | rm. A copy of tl | he agreement, together w      |                       |                                |
| 5         | <ul> <li>In return for the above-disclosed fee, I h         <ul> <li>Analysis of the debtor's financial bankruptcy;</li> </ul> </li> </ul>   |                  |                               |                       |                                |
|           | b. Preparation and filing of any pet   | ition, schedule  | s, statements of affairs a    | nd plan which may l   | be required;                   |
|           | c. Representation of the debtor at t   | the meeting of   | creditors and confirmation    | on hearing, and any   | adjourned hearings thereof;    |
|           | d. Representation of the debtor in a   | adversary proc   | eedings and other contes      | sted bankruptcy mat   | iters;                         |
| 6         | . By agreement with the debtor(s), the abo   | ove-disclosed f  | fee does not include the f    | following services:   |                                |
|           |  | _                |                               |                       |                                |
|           | Long P.C. House House Committee Comm |                  | CERTIFICATION                 |                       |                                |
|           | I certify that the foregoing is a complete so<br>tor(s) in this bankruptcy proceedings.  | tatement of any  | y agreement or arrangem       | ent for payment to r  | me for representation of the   |
|           | 2/22/2017  |                  | /s/                           | Kashwal Kaur          |                                |
|           | Date   |                  | Signa                         | ature of Attorney     |                                |
|           |  |                  | Sen                           | nrad Law Firm         |                                |
|           | <del></del>  |                  | Nai                           | me of law firm        |                                |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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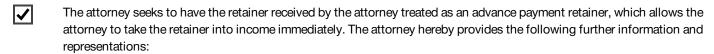
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <u>2/22/2017</u> |                        |
|------------------------|------------------------|
| Signed:                |                        |
| /s/ Caridad Lopez      |                        |
|                        | /s/ Kashwal Kaur       |
| Debtor(s)              | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Lopez, Caridad | Case No   | Case No.                             |  |  |
|-----------------|----------------|---|--------------------------------------|--|--|
| Debtor(s)       |                |   |                                      |  |  |
|                 |                | Chapter.  | Chapter13                            |  |  |
|                 | VERIFIC        | CATION OF CREDITOR MAT                                  | TRIX                                 |  |  |
| Th<br>knowledge |                | y that the attached list of creditors is tr             | rue and correct to the best of their |  |  |
| Date:           | 2/22/2017      | /s/ Lopez, Carida<br>Lopez, Caridad<br>Signature of Deb |                                      |  |  |

WFDS PO BOX 19657 IRVINE, CA, 92623

CAPITAL ONE BANK USA N PO BOX 85520 RICHMOND, VA, 23285

CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

DISCOVER FINANCIAL SERVICES PO BOX 15316 WILMINGTON, DE, 19850

DSNB MACYS PO Box 8113 Mason, OH, 45040

FNB OMAHA PO BOX 3412 OMAHA, NE, 68197

SYNCB/WALMART PO BOX 981400 EL PASO, TX, 79998

SYNCB/AMAZON PO BOX 965015 ORLANDO, FL, 32896

SYNCB/WALMAR PO BOX 965024 EL PASO, TX, 79998

COMENITYBANK/MEIJER Po Box 182273 Columbus, OH, 43218

TD BANK USA/TARGETCRED PO BOX 673 MINNEAPOLIS, MN, 55440 SYNCB/SAMS CLUB PO BOX 981400 EL PASO, TX, 79998

SYNCB/SAMS 4125 WINDWARD PLAZA ALPHARETTA, GA, 30005

Paypal Buyer Credit PO Box 960080 Orlando, FL, 32896

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to \$726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 2/18/2017   |                        |  |
|-------------------|------------------------|--|
| Signed:           |                        |  |
| /s/ Caridad Lopez | idad Lopes             |  |
|                   | /s/ Kashwal Kaur       |  |
| Debtor(s)         | Attorney for Debtor(s) |  |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Caridad   | Lop  |                                    | Case number (if known)   |   |  |  |
|--|--|------------------------------------|--|---|--|--|
| First Name   |  | t Name                             |  |   |  |  |
| <sup>16.</sup> What kind of debts do                                   | estions for Reporting Purposes  16a. Are your debts primarily of   |                                    |  |   |  |  |
| you have?  | "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.  |                                    |  |   |  |  |
|  | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  |                                    |  |   |  |  |
|  | No. Go to line 16c.  Yes. Go to line 17.   |                                    |  |   |  |  |
|  | 16c. State the type of debts you   | owe that are not consu             | mer debts or busines   | s debts.  |  |  |
| <sup>17</sup> · Are you filing under<br>Chapter 7?                     | No. I am not filing under Chapte   | er 7. Go to line 18.               |  |   |  |  |
| Do you estimate that<br>after any exempt<br>property is excluded       | Yes. I am filing under Chapter 7. expenses are paid that fund  |                                    |  |   |  |  |
| and administrative expenses are paid that                              | ☐ No.<br>☐ Yes.  |                                    |  |   |  |  |
| funds will be available<br>for distribution to<br>unsecured creditors? |  |                                    |  |   |  |  |
| <sup>18.</sup> How many creditors<br>do you estimate that              | ✓ 1-49<br>✓ 50-99  | 1,000-5,000<br>5,001-10,000        | anno ann   | 25,001-50,000<br>  50,001-100,000                         |  |  |
| you owe?   | 100-199<br>200-999   | 10,001-25,000                      | Bootson<br>growth of<br>growth of growth o | More than 100,000   |  |  |
| 19. How much do you estimate your assets                               | \$0-\$50,000<br>\$50,001-\$100,000   | \$1,000,001-\$1<br>\$10,000,001-\$ | Branco   | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion |  |  |
| to be worth?   | \$100,001-\$500,000<br>\$500,001-\$1 million   | \$50,000,001-\$<br>\$100,000,001-  | \$6,000,000  | \$10,000,000,001-\$50 billion<br>More than \$50 billion   |  |  |
| <sup>20.</sup> How much do you<br>estimate your                        | \$0-\$50,000<br>\$50,001-\$100,000   | \$1,000,001-\$1<br>\$10,000,001-\$ | Samon  | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion |  |  |
| liabilities to be?   | \$100,001-\$500,000<br>\$500,001-\$1 million   | \$50,000,001-\$<br>\$100,000,001-  | 9440000  | \$10,000,000,001-\$50 billion<br>More than \$50 billion   |  |  |
| Part 7: Sign Below   |  |                                    |  |   |  |  |
| For you  | I have examined this petition, and correct.  | I declare under penalty            | of perjury that the in   | formation provided is true and                            |  |  |
|  | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 1 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |                                    |  |   |  |  |
|  |  |                                    |  |   |  |  |
|  | I request relief in accordance with  | •                                  |  |   |  |  |
|  | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   |                                    |  |   |  |  |
|  | /s/ Caridad Lopez Caudad Septe Signature of Debtor 1   |                                    |  |   |  |  |
|  | Executed on 2/18/2017<br>MM / DD / Y   | <del>////</del>                    | Executed on  | MM / DD / YYYY  |  |  |

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| Fill in this infor   | mation to identify your case  | :   |   |  |
|--|---|---|---|--|
| Debtor 1   | Caridad   |   | Lopez   |  |
|  | First Name  | Middle Name                                   | Last Name   |  |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name                                   | Last Name   |  |
| United States E  | Bankruptcy Court for the: No  | orthern                                       | District of Illinois  |  |
| 0  | _   |   | (State)   |  |
| Case number<br>(If known)  |   |   |   |  |
| Official   | Form 106Dec   | ,   |   | Check if this is amended filing  |
| Declarat   | ion About an In   | dividual Debi                                 | or's Schedules  | 12/1   |
| You must file to<br>money or prope   | his form whenever you file lerty by fraud in connection                                     | bankruptcy schedules                          | nsible for supplying correct information<br>or amended schedules. Making a false s<br>e can result in fines up to \$250,000, or | statement, concealing property, or obtaining<br>imprisonment for up to 20 years, or both. 18 |
| You must file to<br>money or prope   | his form whenever you file lerty by fraud in connection 1341, 1519, and 3571.               | bankruptcy schedules                          | or amended schedules. Making a false s  | statement, concealing property, or obtaining   |
| You must file t<br>money or propo<br>U.S.C. §§ 152,<br>Part 1: Sign        | his form whenever you file<br>erty by fraud in connection<br>1341, 1519, and 3571.<br>Below | bankruptcy schedules<br>with a bankruptcy cas | or amended schedules. Making a false s  | statement, concealing property, or obtaining<br>imprisonment for up to 20 years, or both. 18 |
| You must file t<br>money or propo<br>U.S.C. §§ 152,<br>Part 1: Sign        | his form whenever you file<br>erty by fraud in connection<br>1341, 1519, and 3571.<br>Below | bankruptcy schedules<br>with a bankruptcy cas | or amended schedules. Making a false se can result in fines up to \$250,000, or   | statement, concealing property, or obtaining<br>imprisonment for up to 20 years, or both. 18 |
| You must file to money or proput. S.C. §§ 152,  Part 1: Sign  Did you pool | his form whenever you file<br>erty by fraud in connection<br>1341, 1519, and 3571.<br>Below | bankruptcy schedules<br>with a bankruptcy cas | or amended schedules. Making a false se can result in fines up to \$250,000, or   | statement, concealing property, or obtaining imprisonment for up to 20 years, or both. 18    |

MM/DD/YYYY

Date

MM/DD/YYYY

Date 2/18/2017

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| Debtor 1  | Caridad  |   | Lopez                       | Case number (if known)   |
|-----------|--|---|-----------------------------|--|
|           | First Name   | Middle Name   | Last Name                   |  |
|           | hin 2 years before you fil<br>ditors, or other parties.<br>No<br>Yes. Fill in the details be |   | ou give a financial statem  | ent to anyone about your business? Include all financial institutions,   |
| Dissey, D |  |   | Date issued                 |  |
|           |  |   |                             |  |
|           | Name   |   | MM/DD/YYYY                  | -  |
|           | Number Street  | •   | -                           | •  |
|           | Number Street  |   |                             |  |
|           | City Stat  | e Zip Code  | -                           |  |
|           | !  | ·   |                             |  |
| Part 12:  | Sign Below   |   |                             |  |
| true a    | and correct. I understand  | that making a false statin fines up to \$250,000, on the state of the s | tement, concealing prop     | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|           | Date 2/18/20   | 117   |                             | Date   |
| Did y     | ou attach additional pag   | es to Your Statement of   | Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)?  |
|           | ło   |   |                             |  |
| [ <u></u> | es es  |   |                             |  |
| Did ye    | ou pay or agree to pay so  | omeone who is not an att  | orney to help you fill out  | bankruptcy forms?  |
|           | lo   |   |                             |  |
| Ė         | es. Name of person   |   |                             | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

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### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

| In re:          | Lopez, Caridad                               | Case No                               |                                       |
|-----------------|--|---------------------------------------|---------------------------------------|
|                 | Debtor(s)                                    | Chapter.                              | Chapter13                             |
|                 | VERIFICA                                     | ATION OF CREDITOR MA                  | TRIX                                  |
| Tł<br>knowledge | he above named Debtors hereby verify t<br>e. | hat the attached list of creditors is | true and correct to the best of their |
| Oate;           | 2/18/2017                                    | /s/ Lopez, Caridad                    | Carross of 3.                         |

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| Debi     | or 1 Carldad             |   |                                      | Lopez                      | Case number (if known)   |                                  |
|----------|--------------------------|---|--------------------------------------|----------------------------|--|----------------------------------|
|          | Firet Name               | Middle  | Name                                 | Last Namé                  |  |                                  |
| 16.      | Calculate the            | nedian family income th   | at applies to you. i                 | ollow these ste            | ps:  | - the contains tobal formula and |
|          | 16a. Fill in the s       | tate in which you live.   | <u>[</u> ]                           | Inois                      |  |                                  |
|          |                          | umber of people in your h   |                                      |                            | _  |                                  |
| į        |                          | nedlan family income for y  | our state and size of                |                            | and the second s | \$50,133.00                      |
| ,        | household<br>using the f |   | e instructions for thi               | To fi<br>I form. This list | nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office.   |                                  |
| 17,      | How do the line          | es compare?   |                                      |                            |  |                                  |
|          |                          |   |                                      |                            | is form, check box 1. Disposable income is not determined ition of Disposable Income (Official Form 122C-2).   |                                  |
|          | $\cup v.s.c.$            | 5b is more than line 16c. 6<br><i>§ 1325(b)(3),</i> Go to Part<br>copy your current monthly | . 3 and fill out Calc                | ulation of Pispe           | neck box 2, Disposable income is determined under 11 posable income (Official Form 122C-2). On line 39 of that   |                                  |
| Part     | 3: Calculate             | Your Commitment Po  | eriod Under 11 L                     | J.S.C. §1325(              | b)(4)  |                                  |
| 18.      | Copy your total          | average monthly incom   | e from line 11.                      |                            |  | \$3,371.00                       |
| 19.<br>` |                          |   |                                      |                            | is not filing with you, and you contend that calculating the your spouse's income, copy the amount from line 13.   |                                  |
|          | 19a. If the mark         | at adjustment does not ap   | ply, filk in 0 on line 1:            | 9a.                        |  | -\$0.00                          |
|          | 19b. Subtract l          | ine 19a from line 18.   |                                      |                            |  | \$3,371.00                       |
| 20.      | Calculate your           | current monthly income  | for the year. Follow                 | v these steps:             |  |                                  |
|          | 20a. Copy line 1         | 96.   |                                      |                            |  | \$3,371.00                       |
|          | Multiply by              | 12 (the number of month   |                                      |                            |  | x 12                             |
|          | 20b. The result i        | s your current monthly inc  | ome for the year for                 | this part of the i         | om.  | \$40,452.00                      |
|          | 20c. Copy the n          | nedian family income for yo   | our state and size of                | household from             | ı line 16c.  | \$50,133.00                      |
| 21.      | How do the line          | s compare?  |                                      |                            |  |                                  |
|          |                          | less than line 20c. Unless t<br>period is 3 years. Go to f                                  |                                      | the court, on the          | ne top of page 1 of this form, check box 3, The  |                                  |
|          | Line 20b is 4, The comi  | more than or equal to line<br>mitment period is 5 years.                                    | 20c. Unless otherwi<br>Go to Part 4. | se ordered by th           | e court, on the top of page 1 of this form, check box  |                                  |
| Part     | Sign Belov               | ;   |                                      |                            | <b>9</b>   |                                  |
|          |                          |   |                                      |                            |  |                                  |
|          | By signing h             | ere, i declare under penalt   | y of perjury that the I<br>م         | nformation on t            | his statement and in any attachments is true and correct.  |                                  |
|          | <b>≭</b> /s/ Cs          | orldad Lopez  | ided Loj                             | nes s                      | ¢  |                                  |
|          | Signatu                  | e of Debtor 1   | /                                    | ~~ ·                       | Signature of Debtor 2  |                                  |
|          | Date 2/                  | 21/2017   |                                      |                            | Date   |                                  |
|          | M                        | IM/DD/YYYY  |                                      |                            | MM/DD/YYYY   |                                  |
|          |                          | ed 17a, do NOT fill out or<br>ed 17b, fill out Form 1220                                    |                                      | s form. On line :          | 39 of that form, copy your current monthly income from line  | 14                               |
|          |                          | 1 MANUAR AS 18 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18                                 |                                      |                            |  |                                  |